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THE MULTIDISCIPLINARY APPROACH TO THE PATIENTS WITH ANTIPHOSPHOLIPID SYNDROME

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Abstract

OBJECTIVES: In the last three and half decades, a variety of clinical manifestations involving almost all organs and tissues (cardiac, pulmonary, neurological, renal, cutaneous, hematologic, gastrointestinal, ocular, skeletal and endocrinology), have been described associated with antiphospholipid antibodies (aPL). AIM: The aim of this study was to investigate multidisciplinary approach to the patients with antiphospholipid syndrome (APS).

PATIENTS AND METHODS: Our study includes a total of 508 APS patients; 520 were PAPS patients (283 female and 177 male, mean age 44.0±12.9), while 148 had APS associated with SLE (133 female and 15 male, mean age 47.7±14.8). The diagnosis of APS was made by the presence of aPL and other diagnostic criteria.

RESULTS: In our cohort SAPS patients had significantly higher prevalence of aCL IgG, aCL IgM and aß2GPI IgG. Thrombosis was diagnosed in 46.5% patients.Pseudoinfective endocarditis was observed in 12.8% secondary APS patients and 3.1% in primary APS patients (p=0.004).Presence of ß2GPI IgG was significantly related to stroke, and overall ß2GPI (IgG and IgM) positivity was significantly related to TIA in SAPS patients. Valvular manifestations were significantly related to TIA in both groups of patients and were independent risk factors for TIA in PAPS (OR 3.790 CI 1.597-8.998 p=0.003: table 2). In PAPS, epilepsy correlated with ß2GPI-IgM, migraine with aCL-IgM, thrombocytopenia with aCL-IgM, aCL-IgG, anti ß2GPI-IgG and LA. Livedo reticularis was more prominent in PAPS with high levels of aCL-IgG. Skin ulcerations were more prevalent in aCL-IgM positive SAPS patients and epilepsy more frequently had high levels of anti ß2GPI-IgG in SAPS.

CONCLUSION: In this cross-section analysis of a large cohort of APS patients we analyzed that APS patients can be presented with a wide variety of thrombotic and nonthrombotic manifestations. The key the success is multidisciplinary approach in all time of patient's life.

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