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RESEARCH OF CLINICAL AND BIOCHEMICAL CHANGES OF LIPID METABOLISM FOR ASSESSMENT OF CARDIOVASCULAR RISK IN PATIENTS WITH PSORIATIC ARTHRITIS**Abdullaev U.S**assistant of department propedeutics of internal diseases of
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Objective: To study clinical and biochemical changes in lipid metabolism to assess cardiovascular risk in patients with psoriatic arthritis.

Material and research methods: The study included 58 patients with a confirmed diagnosis of active psoriatic arthritis (main group) and 27 patients with psoriatic arthritis without signs of inflammatory joint damage (comparison group). The activity of the course of the disease was assessed according to the CASPAR criteria, 2006.

Results of research: During the study of the state of lipid metabolism in patients with psoriatic arthritis, it was noted that the severity of dyslipidemia has close associative relationships with the activity of the inflammatory process and the presence of visceral manifestations of the disease and is minimal with low activity in patients with psoriatic arthritis without visceral manifestations. The results obtained were used to study the correlations between the main indicators of lipid metabolism and the intensity of the inflammatory process, as well as the duration of treatment with the use of glucocorticosteroids. It was found that in patients with grade I psoriatic arthritis activity, an increase in blood lipid composition was observed, while the differences in indicators in this group in relation to the control group were statistically insignificant ($p > 0.05$). Patients with grade II psoriatic arthritis had a higher content of blood lipid spectrum indicators, statistically significantly different from those in the control group ($p < 0.05-0.01$). When analyzing and assessing the nature of dyslipidemia in patients with psoriatic arthritis with grade III activity, a statistically significant increase in the concentration of total cholesterol (TC), triglyceride (TG), cholesterol (CS) low-density lipoprotein (LDL) and a decrease in the content of cholesterol and high-density lipoproteins was revealed. (HDL) ($p < 0.01-0.001$). A positive correlation was established between the DAS28 index and TC indicators ($r = 0.32$ and $r = 0.29$, respectively; $p < 0.05$), as well as between C reactive protein (CRP) and LDL cholesterol levels ($r = 0.36$ and $r = 0.32$, respectively; $p < 0.05$).

Conclusion: The comorbidity of active psoriatic arthritis with cardiovascular pathology appears to be a peculiar model of lipid spectrum disorders, which is characterized by atherogenic lipid metabolism disorders (atherogenic index > 3.6). Two main factors have been identified that contribute to the development of dyslipoproteinemia: disease activity and glucocorticoid therapy.

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