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СБОРНИК МАТЕРИАЛОВ МЕЖДУНАРОДНОЙ НАУЧНО-ПРАКТИЧЕСКОЙ КОНФЕРЕНЦИИ «СОВРЕМЕННЫЕ АСПЕКТЫ ДИАГНОСТИКИ И ЛЕЧЕНИЯ РЕВМАТИЧЕСКИХ ЗАБОЛЕВАНИЙ»

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Конференция метариаллари ревматологиянинг долзарб муаммолари, ревматологик касалликларни замонавий ташхислаш усуллари, даволашда замонавий инновацион ёндашувлар, коморбидлик ва мультиморбидлик муаммолари, ревматологик касалликларнинг реабилитацияси ва профилактика масалаларига бағишланган. Кенг учрайдиган ва асосий ревматологик касалликларда илмий тадқиқот ишлари натижалари илмий асослаб берилган.

MUNDARIJA – ОГЛАВЛЕНИЕ - CONTENTS

THE CLINICAL SIGNIFICANCE OF ANTI-FIBRILLARIN (U3-RNP) ANTIBODIES IN SYSTEMIC SCLEROSIS

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Introduction: Systemic sclerosis is a chronic autoimmune connective tissue disease, characterized by endothelial dysfunction, immune abnormalities and progressive fibrosis of skin and multiple inner organs. The main marker of an abnormal immune response is circulating autoantibodies, which are found in more than 95% of patients with systemic sclerosis. It is important to study the clinical, immunological, diagnostic and prognostic significance of autoantibodies, especially anti-fibrillarin antibodies produced against the fibrillarin protein.

Aim. To study the clinical significance of anti-fibrillarin (U3-RNP) antibodies in systemic sclerosis.

Materials and methods: We examined 60 patients with Systemic sclerosis aged 18 to 50 years,46 women and 14 men who received inpatient treatment in the Rheumatology department of the Tashkent medical academy multidisciplinary clinic for 2022-2023 years. Medium duration of the disease was 7,5±3,3 years. 40 patients had a limited form of SSc (lSSD) and 20 patients had a diffuse form (dSSD). All patients underwent clinical, laboratory, instrumental and immunological (to identify AFA- anti-fibrillarin (U3-RNP) antibodies) research methods and the Diagnosis of disease was confirmed according to the 2013 EULAR/EUSTAR diagnostic criteria.

Results. All patients had characteristical peripheral and visceral symptoms of systemic sclerosis. Almost all patients suffered from different skin changes, such as- edema-24 patients (40%), induration - 28 patients (46,7%) digital ulcers- 15 patients (25%), sclerodactyly - 21 patients (35%). Raynaud's phenomenon was detected in all patients. Musculoskeletal manifestations included arthritis (7 patients -11,7%), flexion contractures (6 patients -10%) muscle weakness (5 patients- 8,3%). Dysphagia was the most frequent visceral symptom among examined patients (63,3%).

Anti-fibrillarin antibodies were detected in 10 patients. In the comparative analysis it was noted that the patients who had autoantibodies against fibrillarin showed early onset of the disease, the progressive course of systemic sclerosis, rapid fibrosis of lungs and skin. Pulmonary hypertension was detected overall in 12 patients and 8 of them had AFA.

Conclusion. The results of the study confirm the clinical significance of AFA in Systemic sclerosis can be considered as a predictor of the progressive fibrosis of skin and lungs. Based on the early detection of AFA, it is possible to identify patients with a progressive course of the disease who need immunosuppressive and anti-fibrotic therapy and increase the effectiveness of the treatment.