BIOCHEMICAL MARKERS OF CARDIOVASCULAR RISK IN PATIENTS WITH ANKYLOSING SPONDYLITIS WITH A MINIMUM DEGREE OF ACTIVITY

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Ankylosing spondylitis (AS) belongs to a group of systemic connective tissue diseases. The course of these diseases is accompanied by an increased risk of cardiovascular death. In accordance from the views of some researchers level of cardiovascular mortality in patients with AS increased 1.5-2 times compared with the general population rate. Elevated serum levels of uric acid, total cholesterol and low density lipoprotein cholesterol (LDL-C) are proven biochemical markers of cardiovascular risk.

Objective: To determine the content of uric acid, total cholesterol and low density lipoprotein cholesterol in the blood serum of patients with AS with minimal activity.

Materials and methods. 20 patients (all of them were male), aged 41-69 years, with a central form with 1 degree of AC activity formed a main group. 20 healthy men of similar age formed the control group. Uric acid, total cholesterol and LDL-C was detected in the serum of blood in all examined persons. Persons with clinical manifestations of atherosclerosis (coronary heart disease, cerebral atherosclerosis, atherosclerosis of peripheral vessels of the lower extremities), and renal insufficiency excluded from the study

Results and discussion. The level of total cholesterol in serum of patients of the main group was 4.2 ± 0.14 mmol / l, LDL-C -2.6 ± 0.11 mmol / l, uric acid -402.5 ± 12.23 µmol / l. Similar rates of the control group were respectively 4.5 ± 0.14 mmol / l and 2.8 ± 0.13 mmol / l and 378.2 ± 13.17 µmol / l. Statistical analysis has not found significant differences (p > 0.05) in the serum concentrations of total cholesterol, LDL-C and uric acid between groups of persons surveyed. The correlations between the levels of total cholesterol and LDL-C on the one hand, and uric acid on the other hand in patients with AS also absent.

Conclusions. Reliable changes in the content of uric acid, total cholesterol and LDL-cholesterol in serum of patients with central form AS with 1 degree of activity were not detected. This result is evidence in favor of inflammatory genesis of increasing the cardiovascular risk in patients with AS. However, in the examined patients the activity of inflammation was very low.