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PREVALENCE OF ANTI-RO/SSA ANTIBODY IN SYSTEMIC SCLEROSIS AND ITS INFLUENCE ON THE DISEASE'S CLINICAL PROFILE

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BACKGROUND

Systemic sclerosis (SSc) is an autoimmune connective tissue disease with heterogeneous clinical profile. Autoantibodies have been useful tools as disease markers and predictors of clinical manifestations and prognosis. Little is known about the role of anti-Ro/SSA antibody in this disease. Therefore, the aim of this study was to establish the prevalence of anti-Ro/SSA antibody in SSc in a local sample and its influence on the clinical-epidemiological patient's profile.

METHODS

This is a retrospective study carried out through chart review. To be included patients should fulfill at least nine points of the 2013 Classification Criteria of the American College of Rheumatology/European Alliance of Associations for Rheumatology (ACR/EULAR) classification criteria for SSc; to have disease beginning after 18 years of age and anti-Ro/SSA autoantibody results.

RESULTS

About 142 patients were included. The female:male ratio was 11:1, and the patients were mainly Caucasians (65.67%) with a median age of 55 years and disease duration of 11 years. SSc predominated in its limited form, with a modified Rodnan score had a median of 8. The most common findings were: presence of Raynaud's phenomenon in 97.18%; joint complaints in 53.15%, gastric complaints in 66.67%; 69.50% had esophageal dysmotility and 63.57% had interstitial lung disease. As for the laboratory test, 93.57% of the patients had positive ANA, most of them (41.86%) with a fine speckled nuclear pattern, and 37.35% had the anticentromere autoantibody. Anti-Ro/SSA was present in 24.11% of the sample. Comparing the groups according to the presence of anti-Ro/SSA, those with this autoantibody had higher prevalence of myositis ($p = 0.005$), xerophthalmia ($p = 0.002$) and secondary Sjögren's syndrome ($p < 0.0001$) and less skin involvement ($p = 0.002$). As for autoantibodies, anti-La/SSB ($p < 0.0001$) and anti-U1-RNP ($p < 0.0001$) were associated with the presence of anti-Ro/SSA; anticentromere ($p = 0.02$) was associated with its absence.

CONCLUSION

A total of 24.11% of SSc patients had positive anti-Ro/SSA. This marker was related to a higher prevalence of myositis, xerophthalmia, secondary Sjögren's syndrome and a lower rate of skin thickening. Anti-Ro/SSA present was indicative of the presence of anti-La/SSB and anti-U1-RNP, but absence of anticentromere.

KEYWORDS

Scleroderma, Systemic, Antibodies, Antinuclear, Autoimmunity.