Conclusions: USC's can be isolated from adult sterile urine. They possess the multipotent differentiation abilities and displays a therapeutic effect on bleomycin-induced skin fibrosis and collagen synthesis.

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Disclosure of Interest: None declared

DOI: 10.1136/annrheumdis-2018-eular.4359

Rheumatoid arthritis – prognosis, predictors and outcome

AB0199 ENDOCAN LEVELS AND SUBCLINICAL ATHEROSCLEROSIS IN PATIENTS WITH RHEUMATOID ARTHRITIS

G. Tuzcu¹, A.U. Uslu², A. Tuzcu³, R. Aydogan Baykara⁴, A. Omma⁵, A. Kucuk⁶.

¹Radiology, Balıkesir State Hospital, Balıkesir; ²Internal Medicine, Yunus Emre State Hospital, Edirne; ³Biochemistry, Balıkesir State Hospital, Balıkesir; ⁴Physical Medicine and Rehabilitation, Malatya Education and Research Hospital, Malatya; ⁵Rheumatology, Ankara Numune Training and Research Hospital, Ankara; ⁶Rheumatology, Necmettin Erbakan University, Konya, Turkey

Background: Rheumatoid arthritis (RA) is an inflammatory autoimmune disease with unknown etiology. Accelerated atherosclerosis (AS) and AS with heart disease are among the major causes of morbidity and/or mortality in RA. Endothelial-specific molecule 1 (endocan) is a potential indicator of vascular events and is expressed in response to inflammatory mediators in endothelial cells. Carotid intima media thickness (cIMT) is used to detect early signs of AS but also progression in cardiovascular diseases related to AS.

Objectives: The aim of the present study is to evaluate the relationship of serum endocan levels with RA and cIMT as a candidate marker of diseases to be used in clinical practice.

Methods: The study was conducted between June 2012 and March 2013 at the Rheumatology Clinics of Necmettin Erbakan Meram Medical School, Turkey. Thirty nine³⁹ RA patients, diagnosed according to the 1987 criteria of the American College of Rheumatology, and 30 age- and sex-matched healthy subjects as the control group were included in this study.

Abstract AB0199 – Table 1. The clinical and laboratory parameters in two groups.

	RA patients (n=39) (mean±SD)	Controls (n=30) (mean±SD)	P value
Age (years)	47.7±8.8	43.0±10.8	0.057
Gender (M/F), n (%)	33 (84.6)/6 (15.4)	21 (70)/9 (30)	0.238
BMI (kg/m ²)	28.0±4.3	27.1±5.1	0.443
ESR (mm/h)	28.56±16.16	18.70±12.27	0.005
CRP (mg/dL)	0.55±0.54	0.42±0.55	0.336
TC (mg/dL)	198.28±48.15	165.43 ±30.59	0.001
TG (mg/dL)	153.58±93.02	132.73 ±55.74	0.252
LDL-c (mg/dL)	123.02±44.88	118.81 ±24.76	0.622
HDL-c (mg/dL)	50.43±10.18	42.12±8.18	<0.001
cIMT (mm)	0.63±0.17	0.51±0.12	0.001
Endocan	14.11±3.27	12.10±2.92	0.009

RA, Rheumatoid arthritis; BMI, body mass index; cIMT, carotid intima media thickness; TC, total cholesterol; TG, triglyceride; LDL-c, low density-lipoprotein cholesterol; HDL-c, high density-lipoprotein cholesterol; ESR, erythrocyte sedimentation rate; CRP, C-reactive protein;

Abstract AB0199 – Figure 1

Results: No significant difference was detected between groups with respect to age, sex and body mass index. In the patient group the Endocan and cIMT values were found to be 14.11±3.27 ng/mL and 0.63±0.17 mm, while in the control group they were 12.10±2.92 ng/mL and 0.51±0.12 mm, the Endocan and cIMT values were significantly higher in the patient group (p=0.009 and p=0.001, respectively). Positive correlations were found between Endocan, cIMT and Disease Activity Score of 28 joints (p=0.008 and p=0.029, respectively). When assessing the endocan levels of RA patients in the study population, cut off value of 12.21 with sensitivity of 71%, specificity of 57% and p=0.012 (area under curve: 0.678, 95% confidence interval (CI) 0.555–0.805) were observed according to ROC curve analysis.

Conclusions: Endocan might be a useful marker to evaluate atherosclerotic lesions in patients with RA and also to assess disease severity.

Disclosure of Interest: None declared

DOI: 10.1136/annrheumdis-2018-eular.4656

AB0200 FACTORS ASSOCIATED WITH FUNCTIONAL CAPACITY IN A BRAZILIAN COHORT OF PATIENTS WITH RHEUMATOID ARTHRITIS: RESULTS FROM THE "REAL" STUDY

A.A.V. Pugliesi¹, E.D.A. Macedo¹, M.B. Bertolo¹, R. Giorgi², S. Radominski³, I. Pereira⁴, M.F. Guimaraes⁵, P. Louzada Jr⁶, M.D.F. Cunha⁷, K. Bonfiglioli⁸, C. Breno⁹, L.M.H. Mota¹⁰, G. Castelar-Pinheiro¹¹. ¹Internal Medicine, Rheumatology Unit, Universidade Estadual de Campinas, Campinas; ²Instituto de Assistência Médica ao Servidor Público Estadual, São Paulo; ³Universidade Federal do Paraná, Curitiba; ⁴Universidade Federal de Santa Catarina, Florianópolis; ⁵Universidade Federal de Minas Gerais, Belo Horizonte; ⁶Universidade de São Paulo – Ribeirão Preto, Ribeirão Preto; ⁷Universidade Federal do Pará, Pará; ⁸Universidade de São Paulo, São Paulo; ⁹Universidade Federal do Rio Grande do Sul, Rio Grande do Sul; ¹⁰Universidade de Brasília, Brasília; ¹¹Universidade Federal do Rio de Janeiro, Rio de Janeiro, Brazil

Background: Rheumatoid arthritis (RA) is associated with impairments in functionality, affecting aspects such as physical capacity, independence, mental health, social and professional life. Health Assessment Questionnaire-Disability Index (HAQ-DI) is a validated tool for assessing functional capacity in RA patients. A simple questionnaire with a score of 0 to 3 is applied, with an inverse relationship between grade and functionality. Previous studies have shown worse functional indexes in patients with high disease activity and established joint damage.

Objectives: To relate clinical, laboratory and therapeutic aspects with HAQ-DI in a large cohort of Brazilian patients.

Methods: A prospective, multicenter cohort study ("REAL" Study) involving 11 Brazilian centres specialised in the treatment of RA patients. All patients were submitted to at least 3 clinical evaluations in a 12 month period. Only patients older than 18 years and classified as RA according to 1987 (ACR) or 2010 (ACR/EULAR) criteria were evaluated. HAQ-DI was applied for assessing functional capacity, and the results were analysed for association with clinical, laboratory and therapeutic elements. Comparison between groups was performed using Mann-Whitney or Kruskal-Wallis tests.

Results: Overall, 1116 patients (89.43% females, mean age 58±11 years) took part in the study. Rheumatoid factor (RF) in high levels and bone erosion were both associated with higher HAQ-DI indexes (p: 0.0244 and p<0.0001, respectively). Of all patients, 89.7% were using conventional synthetic disease-modifying antirheumatic drugs (DMARDs) and 36.5% were on biologic DMARDs or