and nonthrombotic manifestations. The key the success is multidisciplinary approach in all time of patient's life. Antiphospholipid syndrome is really a disease with protean faces.

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AB0596

THE IMMUNE COMPLEXES OF IGG/IGM BOUND TO B-2-GLYCOPROTEIN I ARE ASSOCIATED WITH LIVEDO RETICULARIS, THROMBOCYTOPENIA AND SICCA IN APS PATIENTS

D. Pérez¹, L. Stojanovich², L. Naranjo¹, N. Stanisavljevic², G. Bogdanovic², M. Serrano¹, A. Serrano¹. ¹Immunology, Hospital Universitario 12 de Octubre, Madrid, Spain; ²Internal medicine, Bezanjska Kosa, University Medical Center, Belgrado, Serbia

Background: Several manifestations strongly associated with APS have been excluded as classification criteria.^{1,2}

Objectives: The aim of this study was to investigate correlation between circulating immune-complexes of IgG or IgM antibodies bound to B2GPI (B2G-CIC and B2M-CIC) and clinical manifestations in Serbian cohort of APS patients.

Methods: A total of 57 patients with APS were evaluated: 35 with PAPS and 22 patients with SAPS. Mean age was 47.6±1.6 years; 36 (63.2%) were women. All patients have met the 2006 revised Sydney criteria for APS. Quantification of B2G-CIC and B2M-CIC levels was performed as previously, for detect B2G-CIC was used anti-human IgG HRP-conjugate and for B2M-CIC human IgM HRP-conjugate, both from INOVA (INOVA Diagnostics Inc., San Diego, CA, USA).

Results: In our cohort Serbian APS patients the prevalence of CIC was 19.29% (11/57); 8 patients with B2M-CIC and the remain 3 patients with B2G-CIC. Livedo reticularis was diagnosed with higher prevalence in patients with CIC compared with patients without CIC; 63.6% and 23.9%, respectively (OR: 5.57, p=0.01). In patients with CIC, thrombocytopenia and leukopenia were more prominent; 54.4% vs 17.4% (OR: 5.70, p=0.01) and 45.5% vs 13.0% (OR: 5.56, p=0.01), respectively. Ophthalmic sicca was more prevalent in patients with CIC; 54.4% vs 8.7% (OR: 12.6, p<0.001). Although complement consumption was more frequent in patients with CIC (figure 1).

Figure 1. Mean levels of C3 (A) and C4 (B) complement in groups. Mean levels of C3 (115.6±9.2 mg/dL and 140.9±4.3 mg/dL, group-1 and group-2 respectively) and mean levels of C4 (140.9±4.3 mg/dL and 30.8±1.6 mg/dL, group-1 and group-2, respectively).

Conclusions: B2G-CIC and B2M-CIC are strongly associated with clinical manifestations related to APS. Widening the APS spectrum is indispensable to better understand this syndrome.

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AB0597

CHANGES IN THE THYROID HORMONES IN PATIENTS WITH SJOGREN'S SYNDROME IN DOMINICAN REPUBLIC

M. Marte-Robles, R. Jimenez-Candelaria, I. Mercedes-Núñez, E. Tejada-Reyes, R. Muñoz-Louis, V. Rosario, R. Peña-Blanco, T. Valdez-Lorie, R. Alba-Férez. *Rheumatology, Hospital Docente Padre Billini, Santo Domingo, Dominican Republic*

Background: Sjogren's syndrome (SS) is an autoimmune chronic where there is a B-cell activation and lymphocytic infiltration of exocrine glands, this can be primary or secondary and characterised by xerostomia, xerophthalmia and extraglandular manifestations¹. Thyroid involvement is frequent in patients with SS sharing histological and antigenic characteristics². 10–24% of patients with SS have thyroid involvement, the most common are Hashimoto's thyroiditis or Grave's disease are the most frequent autoimmune syndromes. Some reports indicated that Hashimoto's Thyroiditis and Grave's disease has an incidence of 4.2% and 3.4% in the patients with SS respectively. A study showed that in patients with SS 45% had changes in the values of thyroid hormones and 24% autoimmune thyroiditis.³⁻⁵

Objectives: Determine the changes in the thyroid hormones in patients with Sjogren's syndrome.

Methods: A cross-sectional study. The information was collected from the digital records of Hospital Docente Padre Billini Rheumatology department during the period October 2017-January 2018. Inclusion criteria: age ≥18 years old, patients with Sjogren's syndrome according to ACR/EULAR 2016 criteria. Excluded patients who did not thyroid test during the study and patients who have a thyroid disorder under treatment. The data was analysed using SPSS V23 Windows 10.

Results: 79 cases were reviewed, of which 51 met the inclusion criteria. 98% were women, average age of 45 years, 9.8% had hypothyroidism and 3.9% hyperthyroidism by laboratory tests. 82.3% were euthyroid. 82.3% had anti Ro and anti La, 96% Schirmer test + and 37.2% positive biopsy report for SS.

Conclusions: In our study, we found that 9.8% of patients with Sjogren's syndrome could be associated with subclinical hypothyroidism and 3.9% with hyperthyroidism what can mask the clinical manifestations at the time of diagnosis. The screening in high-risk patients such as patients with autoimmune disorders remains important.

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AB0598

SIGNIFICANCE OF NON CRITERIA ANTI-PHOSPHOLIPID ANTIBODIES IN THE PATIENTS WITH SYSTÉMIE LUPUS ERYTHEMATOSUS ASSOCIATED WITH ANTIPHOSPHOLIPID SYNDROME

M. Dryglewska¹, A. Majdan², M. Majdan¹. ¹Department of Rheumatology and Connective Tissue Diseases; ²Chair of Oncology, Medical University, Lublin, Poland

Background: Systemic Lupus Erythematosus (SLE) is a chronic inflammatory autoimmune disease in which the uncontrolled activation of the immune system leads to overproduction of autoantibodies (Ab) with different mechanisms of action. Coexistence of anti-phospholipid antibodies (aPL) significantly increases the risk of thromboembolic complications and worsens the clinical course and prognosis of SLE.

Objectives: The aim of study was to determine the relationship between the presence of non-criteria aPLs in SLE patients with criteria and non-criteria clinical symptoms of APS.