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FRI0348 USE OF INTRAVENOUS IMMUNOGLOBULIN THERAPY IN PATIENTS WITH SYSTEMIC SCLEROSIS: A SPANISH MULTICENTER EXPERIENCE

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Objectives: To describe the efficacy of intravenous immunoglobulin (IVIG) therapy in different organic conditions of Systemic Sclerosis (SSc).

Methods: Retrospective multicenter observational study that enrolled patients with SSc treated with IVIG. We collected epidemiological data, SSc complications, treatments and functional tests. Regarding IVIG treatment we recorded the reason to use, number of cycles, and the clinical efficacy at the end of the last IVIG cycle were collected at investigator's discretion. For the comparison of variables, the Chi-square, Fisher's F test and the T test was used.

Results: 41 patients (83% women) were recruited, with a mean age of 58 ± 18.2 years old. The age of diagnosis was 48 ± 8 years old. The diffuse cutaneous SSc was the most frequent in the sample (61%) and 24/41 had Overlap syndrome (49% myositis). Regarding the different SSc complications in treated patients the most frequent were digestive involvement, arthritis and interstitial lung disease (78%, 73%, and 63% respectively). 12% of patients developed cancer and 25% died during the follow-up. The most frequent indication IVIG was myositis (51%) followed by cutaneous (17%). The mean of cycles was 10. 37% of patients had previously undergone treatment with biological therapy, being RTX the most used therapy. 80% of patients had a history of use with corticosteroid therapy. When evaluating the degree of skin involvement (mRSS) patients showed a significant improvement of -2.89 ± 5.2 (p < 0.03) at the end of the follow-up. Indeed we observed better results in the groups of patients with myositis. No differences were observed in the % FVC or % DLCO outcomes during the follow-up. However, when we compared patients with or without overlap syndrome we found differences in %FVC values at the beginning of the study that were not present at the end of the follow-up. Patients with antiScl70 seemed to have less response to IVIG therapy.

Conclusion: Our results suggest that IVIG can be useful for the management of some conditions in specific profiles of patients with SSc.

Prospective studies and randomized clinical trials are necessary to establish the efficacy and safety of IVIG to treat the different conditions of SSc.

	IVIG N=41(%)	Diffuse n=25 (%)	Limited n=16(%)
Women	34(83)	21(84)	13(81)
Age	58 ± 18		
Overlap	24(59)	11(44)	13(81)
Clinical manifestations			
Joint	30(73)	22(88)	8(50)
Muscular	30(73)	16(64)	14(88)
Reflux GE	32(78)	20(95)	12(75)
Interstitial lung disease	26(63)	16(64)	10(63)
Pulmonary hypertension	5(12)	2(8)	3(19)

	myositis	Overlap	AntiScl70	PM/ Scl
Initial mRss	16±12	13±11	29±9	15 ±10
Final mRss	12±12	7±7	32±7	13 ±15
Initial FVC	68±25	64±24	56±23	60 ±13
Final FVC	73±26	72±25	58±20	67 ±18
Initial DLCO	56±16	56±17	55±16	49 ±13
Final DLCO	68±25	71±24	45±12	69 ±18

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FRI0349 RELATIONSHIPS BETWEEN BODY COMPOSITION AND NAILFOLD VIDEOCAPILLAROSCOPY PATTERNS IN SYSTEMIC SCLEROSIS PATIENTS

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Background: Systemic sclerosis (SSc) is a chronic autoimmune disease, characterized by microvascular damage and progressive fibrosis. Among clinical complications, abnormal body composition and sarcopenia have been reported in SSc patients(1,2). Nailfold videocapillaroscopy (NVC) is a safe diagnostic tool to assess microvascular progressive damage and may predict severe organ involvement in SSc(3).

Objectives: The aim of this study was to evaluate body composition in SSc patients and assess possible differences between patients with specific NVC patterns of microangiopathy.

Methods: 38 patients (6 men and 32 women) fulfilling ACR 2013 criteria for SSc underwent NVC to assess their NVC patterns ("Early", "Active" and "Late" pattern)(4) and DXA to evaluate body composition(5). In particular we analyzed: total mass, total lean mass, total fat mass, bone