CHARACTERISTIC ULTRASOUND FEATURES OF SALIVARY GLAND LYMPHOMA IN PATIENTS WITH PRIMARY SJÖGREN’S SYNDROME

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Background: Lymphoma was one of the most severe complications of primary Sjögren’s syndrome (pSS). Lymphomas often develop in organs where pSS is active, such as salivary glands. The enlargement of salivary glands is considered a predictive factor in previous studies. It is clarified that salivary gland ultrasonography can visually and clearly demonstrate the parenchyma structure, which is a feasible method for SS diagnosis. However, there are no specific ultrasound features of salivary gland lymphoma and no early ultrasonic alarming system have been reported.

Objectives: To describe the characteristic ultrasound features and assess ultrasonic alarming value of salivary gland lymphoma in patients with pSS.

Methods: We followed a cohort of 63 patients with pSS from March 2017 to September 2019 and salivary gland ultrasonography was performed every three months. All patients were examined by grey-scale and color Doppler ultrasonography (US). The size, echotexture and vascularity of salivary glands were analyzed. US-guided core-needle biopsy (US-CNB) was used for the diagnosis of salivary gland lymphoma.

Results: In 63 patients with pSS, parotid enlargement occurred in 11 patients and none of them had submandibular gland enlargement. During the follow-up, 2 patients with parotid enlargement demonstrated recovery of size and echotexture improved. The remaining 9 patients had permanent parotid swelling and echotexture unchanged. US-CNB was performed in these 9 patients and histological and immunohistochemical findings of the cores suggested parotid lymphoma. Compared with other patients, these 9 patients revealed marked, permanent parotid enlargement of the unilateral or bilateral or asymmetric parotid. The parotid lymphoma ultrasonography was characterized by multiple, relatively large, well-demarcated hypoechoic (>6mm) with increased vascularity.

Conclusion: Ultrasonographic assessment of salivary gland helped to alarm the occurrence of lymphoma in pSS patients. Marked, permanent and asymmetric parotid enlargement with multiple, relatively large, well-demarcated hypoechoic in echotexture seemed to be characteristic for parotid lymphoma in pSS patients.

References:

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ROLE OF CYTOKINES (INTERLEUKIN 17 AND 23) IN PSYCHIATRIC COMORBIDITIES ASSOCIATED WITH BECHET’S DISEASE

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Background: Behcet’s disease (BD) is a chronic multi-systemic autoimmune disease associated with increase prevalence of psychiatric comorbidity (Ihan et al. 2016). Pro-inflammatory cytokines have been reported to be elevated in patients with depression and anxiety. IL-23/IL-17 axis has been shown to play a remarkable role in pathogenesis of BD, depression and anxiety (Sugita et al. 2012, Gheita et al. 2015). However, the relation between the serum level of interleukin (IL)-17 and IL-23 and incidence of cognitive impairment, depression and anxiety in Behcet patients is still unknown.

Objectives: To evaluate the serum levels of IL-17 and IL-23 in Egyptian patients with BD and evaluate the correlations between the level of inflammatory cytokines and psychiatric manifestations as cognitive impairment, depression and anxiety.

Methods: Study design and recruitment
In a case control study, we recruited 45 BD patients, who fulfilled the modified International Criteria for Behcet’s Disease (ITR-ICBD 2014) from the Rheumatology and Rehabilitation Department, Assiut University hospital. Thirty apparently healthy age and sex matched subjects were recruited, served as controls. This study was approved by the Ethical Committee of the Assiut University, Egypt. Informed consent was obtained from all participants.

Study methodology
All patients and controls were assessed for cognitive impairment, depression and anxiety using memory assessment scale, Hamilton depression rating scale and Hamilton anxiety rating scale respectively.