Background: The prevalence of salivary glands ultrasound (SGUS) abnormalities in Sjögren’s syndrome (SS) is well described. However, the prevalence is still unknown in rheumatoid arthritis (RA).

Objectives: The main objective of this study was to describe the prevalence of SGUS parenchymal structural abnormalities in patients with RA. Secondary objectives were: (i) to study correlation between disease duration and the SGUS OMERACT score and (ii) to study correlation between duration of sicca syndrome and the SGUS OMERACT score.

Methods: 561 patients with RA satisfying ACR/EULAR 2010 classification criteria were included in 10 French centers in the prospective cohort BCD, comparing joint ultrasonography to clinical follow-up. Cross sectional SGUS examination (parotid and submandibular) was performed in a subsity of this cohort. The new OMERACT-SGUS scoring system was used and clinical, biological, immunological and radiological data were collected.

Results: 100 patients agreed to be included in this substudy of BCD cohort, and a total of 98 SGUS patients data were evaluated (lack of SGUS data for 2 patients). Most patients were women (81%), mean age 59 years, with time from RA diagnosis of 11 years on average. The mean CRP-DAS-28 at baseline was at 3.2 with a third of patients in remission at inclusion. Anti-CCP antibodies or RF was positive in 92% (92%), 27% patients (27%) complained of eye dryness and 20% (20%) of mouth dryness. 12% (12%) suffered from both. The levels of self-reported fatigue was higher than in the general group of RA included in the study. Two thirds of patients benefited from csD-MARD, with a third treated with bDMARDS. 33% (33%) also benefited from a corticosteroid treatment. Among 98 patients, 22 (22.5%) had at least one salivary gland scored grade 1 or more, this number was reduced to 18 patients when considering only the parotids. 7 patients (7.1%) had at least one salivary gland scored grade 2 or more, with a number reduced to 4 patients (4.1%) when considering only the parotids. Only one patient (1%) had a parotid gland scored 3. In the 7 patients presenting significant abnormalities in SGUS (grade 2 or more), 5 patients had either dry or dry mouth symptoms (71.4%).

Conclusion: Our findings suggest that 7% of RA patients present significant SGUS abnormalities according to OMERACT scoring system, associated with clinical sicca syndrome in 71% of cases. There was no significant association between the duration of rheumatoid arthritis and the OMERACT score (Spearman coefficient for correlation -0.028, p = 0.99). There was also no significant association found between the duration of sicca symptoms and the OMERACT score (Spearman coefficient for correlation 0.025, p = 0.89). This study highlights the importance of SGUS assessment in RA sicca patients to improve monitoring and follow-in in routine clinical practice.

REFERENCES:

Disclosure of Interests: None declared