

Autoimmune Diseases

P0327

**THE PREVALENCE OF ANTI-DFS70 ANTIBODIES AND THEIR ASSOCIATION WITH OTHER ANTINUCLEAR ANTIBODIES**

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**BACKGROUND-AIM**

Antinuclear antibodies (ANA) are used in diagnostics of systemic autoimmune rheumatic diseases (SARD). By indirect immunofluorescence (IIF) dense fine speckled (DFS) fluorescence pattern of ANA's associated with antibodies to DFS70 (70kDa protein) can be detected. A distinctive clinical association of anti-DFS70 antibodies is still unclear. The aim of this study was to compare prevalence of anti-DFS70 antibodies between groups of patients with SARD and with other inflammatory conditions also to evaluate anti-DFS70 antibodies in association with other ANA.

**METHODS**

235 patients (41,7 ± 23,5 years old) were included in the study; two groups were distinguished based on the established diagnosis: patients with SARD (n = 117) and group of patients with other inflammatory conditions (n = 118). The blood serum of the patients was investigated for ANA by IIF and line immunoassay (LIA) (Euroimmun AG, Lubek, Germany).

**RESULTS**

The prevalence of anti-DFS70 antibodies in patients with SARD and with other inflammatory conditions was 24.8 and 18.6 %, respectively. There was no statistically significant difference in the prevalence of anti-DFS70 antibodies between compared groups. Concomitant ANA were found in 62.1 % of anti-DFS70 positive SARD patients group. Compared anti-DFS70 negative and anti-DFS70 positive patients with SARD, only anti-Jo-1 (Histidyl-tRNA synthetase) antibodies were significantly more prevalent in anti-DFS70 positive patients group (p = 0,013).

**CONCLUSIONS**

There was no statistically significant difference in the prevalence of anti-DFS70 antibodies between groups of patients with systemic autoimmune rheumatic diseases and with other inflammatory conditions. Statistically significant association was found between anti-DFS70 and anti-Jo-1 antibodies in patients with systemic autoimmune rheumatic diseases.

Miscellaneous

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**THE ASSOCIATION BETWEEN SENSITIZATION TO INHALED ALLERGENS AND EOSINOPHIL AMOUNT IN NASAL SECRETIONS OF PATIENTS WITH ALLERGIC RHINITIS**

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**BACKGROUND-AIM**

To evaluate the association of nasal secretions eosinophil amount with allergen-specific immunoglobulin E (IgE): examine the dependence of eosinophil amount on the prevalence and sensitization frequency of inhaled allergens, also analyze the association of nasal secretion eosinophil amount with allergen sensitization in patients with allergic rhinitis.

**METHODS**

34 patients (38±11 years old) with allergic rhinitis were included in the study. Nasal secretions of patients were obtained to examine eosinophil amount in the smear. Allergen-specific IgE in the blood serum was detected using ALEX (Allergy explorer) – a solid phase immunoassay (Macro Array Diagnostics).

**RESULTS**

80% of patient's nasal secretions contained more than 5% eosinophil. Allergen-specific IgE (II-IV classes) was detected in 84% of patients: 27% of them were sensitized to 3 allergens, 35% to 4-8 and 8% to 9-15 allergens. Most commonly sensitization was detected to inhalant allergens such as: cat epithelium (47%), timothy grass (37%), birch (34%) and dust mites (28%). No statistically significant association between nasal secretions eosinophil amount and sensitization to allergens was identified. No statistically significant difference between nasal secretion eosinophil amount and the frequency of sensitization (mono-, oligo-, poly-sensitization) was identified. 46% of patients were sensitized to a combination of inhaled outdoor and indoor allergens, 29% to indoor allergens and 25% to outdoor allergens. However, no statistically significant dependence of nasal secretion eosinophil amount on sensitization to indoor and outdoor allergens was obtained.

**CONCLUSIONS**

Based on the results of the study it can be stated that there is no association between nasal secretion eosinophil amount and sensitization to inhaled allergens in patients with allergic rhinitis.