

Clinical features and risk of recurrence of acute calcium pyrophosphate crystal arthritis

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Objectives: To investigate the clinical features and risk of recurrence in patients with acute calcium pyrophosphate (CPP) crystal arthritis **Methods:** This study was conducted on patients diagnosed with acute CPP crystal arthritis based on the presence of CPP crystals in the joint fluid or chondrocalcinosis. Clinical features of acute CPP crystal arthritis and acute gout attack were compared. Multivariate analysis was performed to determine the factors associated with the recurrence of acute CPP crystal arthritis. **Results:** In total, 93 patients with acute CPP crystal arthritis and 173 patients with acute gout attack were identified. Patients with acute CPP crystal arthritis were older (78 vs 62 years, $p < 0.001$), predominantly female (66% vs 12%, $p < 0.001$), had lower BMI (22.5 vs 23.7, $p = 0.006$), lower renal insufficiency rate (14% vs 41.6%, $p < 0.001$) and higher rate of preceding infection (22.6% vs 11%, $p = 0.012$) compared with patients with acute gouty arthritis. The recurrence rate of acute attack was lower in patients with acute CPP crystal arthritis than in those with acute gouty arthritis (15.7% vs 29.1%, $p = 0.005$). In multivariate analysis, warfarin use was significantly associated with the risk of recurrent acute CPP crystal arthritis (hazard ratio, 6.778; 95% CI, 1.744-26.338; $p = 0.006$). **Conclusion:** Acute CPP crystal arthritis was more common than acute gout attack in aged, female and patients with preserved renal function. Recurrent attack was significantly associated with warfarin use. Thus, careful follow-up should be considered for patients with acute CPP crystal arthritis taking warfarin.

Pulmonary hypertension might be correlated with interstitial lung disease in systemic sclerosis

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Background: Systemic sclerosis (SSc) is a systemic autoimmune disease characterized by uncontrolled fibrosis of the skin and target organs. The involvement of the respiratory system including interstitial lung disease (ILD) and pulmonary hypertension, indicates a poor prognosis and a major cause of death. We investigated the clinical features of patients with SSc according to the presence of ILD. **Methods:** We retrospectively collected the clinical characteristics of patients with SSc and compared them according to the presence of ILD. **Results:** The study enrolled 108 patients with SSc, and of those, 49 (45.4%) patients had diffuse type, and 59 (54.6%) patients had the limited type of SSc. Comparing the patients with and without ILD, disease duration, white blood cell (WBC), platelet, erythrocyte sedimentation rate (ESR), and presence of pulmonary hypertension were differed significantly. Multivariate logistic regression analysis identified the duration of disease ($or = 1.13$, $p = 0.019$), and WBC (1.00, 0.037), ESR (1.03, 0.007) and pulmonary hypertension (11.42, 0.005) were related with ILD, respectively. **Conclusions:** In SSc patients with ILD, the duration of the disease was longer and the WBC and platelet counts, ESR levels, and incidence of possible pulmonary hypertension were significantly higher than in those without ILD. With adjustment, only combination of pulmonary hypertension was significantly related with the presence of ILD in SSc.