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FREQUENCY OF CARDIOVASCULAR RISK FACTORS IN PATIENTS WITH PSORIATIC ARTHRITIS: A CROSS-SECTIONAL STUDY

UČESTALOST KARDIOVASKULARNIH RIZIČNIH ČIMBENIKA U BOLESNIKA SA PSORIJATIČNIM ARTRITISOM: PRESJEČNO ISTRAŽIVANJE

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Introduction: Inflammatory rheumatic diseases (IRD), including psoriatic arthritis (PsA), are associated with increased cardiovascular (CV) risk due to systemic inflammation, multiple comorbidities, and medications used. The aim of the study was to investigate the prevalence of traditional CV risk factors among patients with PsAin comparison to a control group.
Participants and methods: Atotal of 67 patients with PsA, and 69 control subjects without IRD or psoriasis (PsO), were consecutively enrolled in a cross-sectional study. The study was conducted in the Clinical Hospital Center Zagreb from 2021 to 2023. Data on tobacco use, body mass index (BMI), the diagnosis of hypertension, diabetes mellitus (DM), dyslipidemias, and hyperuricemia were obtained through medical history taking and clinical examination. Tobacco use was assessed by smoking status (never, former or current smoker), number of cigarettes smoked per day, and number of years smoked. A standard evaluation of PsAdisease activity and functional status was performed. C-reactive protein was used to calculate disease activity scores. Basic sociodemographic parameters were recorded.
Results: Obesity and overweight were highly prevalent in both PsA(37.3 % and 76.1 %, respectively) and control group (33.3 % and 75.4 %, respectively), with no significant differences between the groups (χ^2-test, $p = 0.88$). Ahigher proportion of PsA patients had DM (7.4%) compared to the controls (0.7%) (Fisher exact test, $p < 0.01$). As anticipated, hyperuricemia was significantly more frequent in the PsAgroup (14.7% vs. 3.7%, Fisher exact test, $p < 0.01$). Group comparison showed no significant differences in hypertension and dyslipidemia prevalence. Additionally, no difference was noted regarding tobacco use, with the exception that patients with PsAhad a shorter smoking history (median 11.5 vs. 20.0 years, Mann- Whitney U test, p= 0.01). Median DAPSAwas 16.7 (range: 0.1- 68.2), HAQ 0.875 (range: 0- 2.1), and PASI score 1.4 (range: 0- 15). Sociodemographic variables, including age and gender, were equally distributed between the groups.
Conclusion: Patients with PsAin this study are at higher CV risk and more likely to suffer from diabetes and hyperuricemia. Concerning obesity and overweight levels in PsAand control group necessitate comprehensive public health intervention combined with individualized bio-psycho-social disease management.

Keywords: psoriatic arthritis, cardiovascular diseases, risk factors, obesity, diabetes mellitus
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