https://doi.org/10.33004/reumatizam-supp-71-1-77

INTERPLAY BETWEEN PSORIATIC ARTHRITIS AND ATHEROSCLEROTIC VASCULAR DISEASE IN AN ELDERLY MALE: A CASE-BASED ANALYSIS

MEĐUSOBNI ODNOS PSORIJATIČNOG ARTRITISA I ATEROSKLEROTSKE VASKULARNE BOLESTI KOD STARIJEG MUŠKARCA: ANALIZA NA TEMELJU SLUČAJA

Mjellma Rexhepi [1], Blerta Rexhepi-Kelmendi [2], Dardan Kocinaj [3]

[1]*University Clinical Center of Kosova, Rheumatology Clinic Medical Faculty, University of Prishtina*
[2]*University Clinical Center of Kosova, Rheumatology Clinic*
[3]*Cardiology Department, Prishtina*

Psoriatic arthritis (PsA) is not only a debilitating joint disease but also a systemic inflammatory disorder that contributes significantly to accelerated atherosclerosis and vascular dysfunction. Chronic systemic inflammation, driven by elevated cytokines such as TNF-α and IL-6, plays a pivotal role in endothelial injury and plaque formation, creating a pathogenic link between PsA and cardiovascular disease (CVD).

This case explores the complex interplay between chronic inflammatory autoimmune disease and advanced cardiovascular pathology in a 70-year-old male with psoriatic arthritis, ischemic heart disease (IHD), prior stenting of the left anterior descending (LAD), left circumflex (LCX), and right coronary arteries (RCA), and complete occlusion of the left internal carotid artery (ICA).

The presence of multi-vessel coronary artery disease requiring percutaneous coronary intervention (PCI) reflects advanced atherosclerotic burden, likely exacerbated by the pro- inflammatory milieu associated with PsA. Additionally, the complete occlusion of the left ICA suggests widespread atherosclerotic involvement of extracardiac vessels, further increasing the risk of cerebrovascular events. The convergence of these conditions illustrates a shared pathophysiological foundation rooted in chronic inflammation, oxidative stress, and immune dysregulation.

This case underscores the need for an integrated, multidisciplinary approach in managing patients with inflammatory arthritis and cardiovascular disease. Early identification and aggressive treatment of systemic inflammation, along with rigorous cardiovascular risk factor control, are essential. Future directions should focus on personalized medicine strategies and longitudinal studies to better understand and mitigate the interconnected risks of PsA and atherosclerotic disease progression.

Keywords: psoriatic arthritis, cardiovascular diseases, inflammation
E-pošta glavnog autora: mjellma.rexhepi@uni-pr.edu
Conflict of interest statement: The authors declare no conflict of interest.