CARDIAC MANIFESTATION IN PATIENTS WITH PULMONARY VASCULITIS

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GPA is one of the most common forms of systemic vasculitis, that usually involves the upper and lower respiratory tract but it may affect also multiple organ systems. e the two most common cardiac manifestations in GPA patients are pericarditis and coronary arteritis. In two European cohort studies cardiovascular involvement in GPA patients was an independent risk factor for disease relapse and treatment resistance.

The group of 88 consecutive patients with GPA (mean age 49 yrs, 28 male) were observed in the study. In all patients echocardiography was performed. Left atrium (LA) enlargement was observed in 7 (8%) patients and interventricular septum (IVS) hypertrophy in 34 (38.4%). In one patient all heart chambers were enlarged. Systolic left ventricle function was decreased (ejection fraction≤50%) in 8 (9%) patients, but in 12 (13.6%) left ventricle wall motion abnormalities were described. Left ventricle relaxation dysfunction was observed in 15 (17%) patients. Aortic valve insufficiency was showed in 25 (28%), mitral valve insufficiency in 9 (10%) and tricuspid regurgitation in 8 (9%) patients. Pericardial effusion was described in 3 (3.4%) patients.

Cardiac involvement in granulomatosis with polyangiitis is potentially life-threatening condition. The most common cardiac manifestation in this study group were valvular disease and left ventricle dysfunction, whereas pericarditis was uncommon.