

Screening of patients with rheumatism improves insight into cardiovascular disease

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Since the fifties, researchers have observed that patients with rheumatoid arthritis have an increased mortality from cardiovascular disease. Patients with this form of rheumatism were approximately 50% more likely to suffer from cardiovascular disease (relatively often fatal) compared with healthy peers of the same gender. PhD candidate Inger Meek of the University of Twente has performed research on multiple forms of rheumatic disease and the risk of cardiovascular disease. Patients with gout have a particularly high risk of cardiovascular disease.



In comparison with the rest of the population, there is a higher risk of cardiovascular disease in patients with a rheumatic disease, not only in patients with rheumatoid arthritis, as historical research indicates. Rheumatoid arthritis is an autoimmune disease: the immune system turns against its own body and inflammations in the joints develop. The research by Meek in a group of patients with various rheumatic diseases shows that gout patients have the most unfavourable risk profile of all the risk factors examined. Gout is a rheumatic disease in which uric acid crystals are deposited in the joints. This is because of poor metabolism in the body, with the result that uric acid accumulates.

Careful with painkillers

It has also been shown that a continuous use of ibuprofen as a painkiller doesn't seem to do much for the risk of cardiovascular disease. On the other hand, the risk for patients with rheumatoid arthritis is actually lower when they are treated with the drug methotrexate. And, in contrast to the current guidelines, the drug naproxen (ananti-inflammatory painkiller) should be avoided in patients at risk who are also taking aspirin to prevent a heart attack. "Our study shows that the combination of naproxen with aspirin inhibits the anti-clotting effect of aspirin."

Screening of patients

The data for Meek's study comes from the cohort Arthritis Center Twente Cardiovascular Disease (CVD ACT). Since 2009, the patients at the Arthritis Center Twente have been screened for risk factors for cardiovascular disease. The results of this screening are stored anonymously in a database, and patients are regularly monitored for the occurrence of new cardiovascular disease and death.



Fatality rate is decreasing

Three years after the screening, the risk of rheumatoid arthritis patients from the ACT-CVD cohort getting cardiovascular disease for the first time did not increase compared to osteoarthritis patients, whereas this was the case in historical cohorts. Osteoarthritis is a rheumatic condition in which the cartilage deteriorates in quality and becomes thinner and softer. The proportion of cardiovascular disease with a fatal outcome was 6.9% in the ACT CVD cohort, a marked decrease compared to the 52.9% fatality rate in a similar cohort from 1998 with higher disease activity.

Provided by University of Twente

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