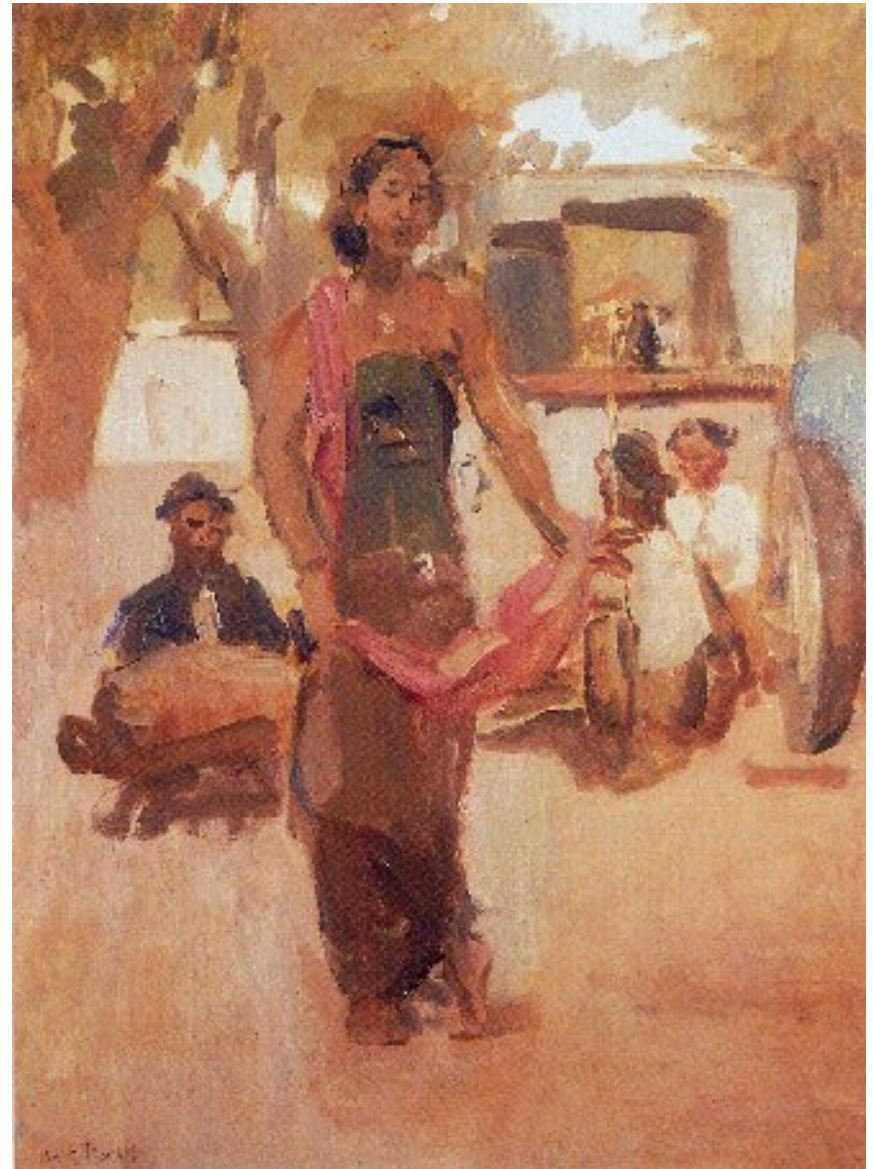


Update from the 13th International Conference

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ANCA workshops

- 1 st workshop in Copenhagen, Danmark, in 1988
- 13th workshop in Cancun, Mexico, 26th - 29th April 2007
- 200 - 250 participants of many different countries
- Nice beaches, good food

Highlights of the CANCUN ANCA workshop

- Time-to-diagnosis
- Susceptibility for the disease
- Possible role for microbes
- Fatigue
- Risk for thrombosis
- Therapeutic studies

Time-to-diagnosis (I)

- Often difficult to make an early diagnosis
- But...less damage if the diagnosis is made earlier
- 1983 NIH (USA): 85 patients
time-to-diagnosis: 8.3 months
- 1970-1986 Groningen (NL) 35 pts
time-to-daagnosis: 17.2 (1 – 108)
mnths
14/35 pts > 1 year

Time-to-diagnosis (II)

- Questionnaire 445 pts in Germany
- Time-to-diagnosis:
 - 1966 – 1993: 8 months
 - 1994 – 1998: 5 months
 - 1999 – 2003: 4 months
- Good news; but....awareness improvement of doctors is needed !

Susceptibility for the disease

- Abnormalities in the immune system
 - genetic
 - acquired
(environment, microbes)
- Immune balance
- Immune senescence

Immune system abnormalities

- Regulation of the immune system
 - amount of regulators: enough
 - function of regulators: impaired
- Senescence of the immune system
 - senescent immune cells predominate in the lesions
 - more senescent cells in the circulation

Microbes (I)

- In Wegener *Staphylococcus aureus*
- Eradication of *S. aureus* not possible; suppression with Co-trimoxazole effective
- Healthy people with *S. aureus* infection make IgM-ANCA
- Significance ?

Microbes (I I)

- Vasculitis in babies and young infants:
Kawasaki disease
- Experimental model:
injection of an extract of microbes
result in Kawasaki disease in animals

Fatigue

- The most important complaint of patients is:

FATIGUE

- More research is NEEDED!

Risk for thrombosis

- Patients with vasculitis have an increased risk for thrombosis (annual incidence 7 per 100 person-year)
- Why ?
- A possible mechanism: Anti-PR3 pts have anti-complementary PR3 antibodies that activate coagulation

Therapeutic studies

- New drugs for Wegener:
 - Gusperimus
 - Rituximab
- Giant cell arteritis:
 - meta-analysis:
 - steroids versus steroids + MTX
 - steroids + MTX is better!