

ANTIPHOSPHOLIPID SYNDROME IN MALES IN COLOMBIAN PATIENTS

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Background: The Primary Antiphospholipid Syndrome (PAPS) was described initially in women characterized by thrombosis and pregnancy morbidity, including fetal losses, at the present time the number of males is every greater who can present this one syndrome, with different characteristics and in some cases with greater severity than the women. In this study we described the clinical characteristic presented by a sample of Colombian males.

Methods: Patients of rheumatology of the Clínica de Artritis y Rehabilitación and Clínica Salud Coop 104 Jorge Piñeros Corpas, Bogotá, Colombia, during the period between October 2003 to October 2004. Male patients, which they fulfilled the criteria to the International Consensus for PAPS, 1999, and patients with secondary antiphospholipid syndrome, who were diagnosed with SLE using the ACR SLE Classification Criteria.

Results: We analyzed 24 male patients, with age between 12 years to 71, average of 39, 7 years, 7 of which they had systemic lupus erythematosus (SLE). Clinically 12 patients (1 presented venous thrombosis subclavian, 1 portal vein, 10 femoral), arterial thrombosis 7, (1 mesenteric thrombosis, 2 acute infarct of myocardium, 2 pulmonary, 3 in legs, 1 in spleen) livedo reticularis 4 patients, Raynaud's phenomenon 9, central nervous system manifestations 10, (Migraine 7, Convulsive syndrome 1, chorea 1, cognitive dysfunction 1), Glomerulonephritis 5 patients, 4 had SLE, ulcers on the legs refractory to treatment 3, Thrombocytopenic purpura 7, hemolytic anemia, 2. They presented positive anticardiolipin antibodies IgG 23, Anticardiolipin antibodies IgM 15 and both 15. 16 patients received treatment with anticoagulation with warfarin, hydroxychloroquine 9, prednisolone 10, acetylsalicylic acid 16, in the cases of SLE also they have received cyclophosphamide, azathioprine, mycophenolate and rituximab in refractory cases. During this period of time 2 patients deceased due to massive pulmonary thromboembolism. 5 patients needed unit intensive care.

Conclusions: The APS in males appears with smaller frequency than in women, but apparently it has tendency of greater severity, causing 50% of venous thrombosis, since it is not only associated to the presence of venous thrombosis(50%), but also to arterial thrombosis (29.16%), alterations in central nervous system (24%), and in this one sample was a mortality of 8.3%. We thought to increase the sample to be able to determine other key clinical characteristics in this one sub-group of patients