

122. PARTICULARITIES IN THE EVOLUTION OF PSORIATIC ARTHRITIS WITHOUT SKIN PSORIASIS

Author: **Otilia Gavrilovici**

Scientific adviser: Russu Eugen, MD, PhD, Professor, Department of Internal Medicine, Rheumatology and Nephrology

Nicolae Testemitanu State University of Medicine and Pharmacy of the Republic of Moldova

Introduction. Psoriatic arthritis (APs) is a chronic seronegative inflammatory arthropathy, associated with skin psoriasis. Sometimes it can precede the skin psoriatic lesions. Etiology and pathogenesis remain unknown, but the genetic predisposition, the influence of the immune system and the environment are important in the development of the disease. APs is an invalidating disease with a different presentation in time, at one time it predominates as skin disease, and another time as articular disease, with erosive and destructive joint changes, which is found in about 40-60% of patients. Thus, a complex approach of the clinical features of the disease is needed, in order to make a correct and timely diagnosis of the disease.

Aim of the study. investigation of the evolution of psoriatic arthritis in patients without skin psoriasis

Materials and methods. the study group contains 40 patients diagnosed with psoriatic arthritis established in accordance with the CASPAR (2006) diagnostic criteria, admitted to the rheumatology and arthrology department of IMSP SCR *Timofei Mosneaga* during the period 2015-2017. In order to highlight the evolutionary particularities, the patients were grouped into 2 groups: I group (30 patients) psoriatic arthritis with skin psoriasis, II group (10 patients) psoriatic arthritis without skin psoriasis. Then group I and II were separated into 5 subgroups depending on the clinical variant of the disease. The description of each group was made by gender, mean age and the average age of joint affection.

Results. The study performed on a group of 40 patients revealed the clinical particularities of the evolutionary variants of psoriatic arthritis, characterized by a wide variety of manifestations of the articular syndrome, expressed by 5 clinical types: polyarticular (31 %), axial (25.5%), oligoarticular (17.4%), distal interphalangeal (14.5%) and mutilating (11.6%), as well as peculiarities of extraarticular disorders.

Conclusions. Severity of joint damage was assessed in relation to the presence or absence of skin manifestations of psoriasis. It has been established that the association of cutaneous psoriasis aggravates the clinical evolution of vertebral column lesions, especially in the polyarticular variant and less in the axial and mutilating variant.

Key words: psoriatic arthritis, immune-genetic status

DEPARTMENT OF INTERNAL MEDICINE, CLINICAL SYNTHESIS.

123. THERAPY WITH CLOPIDOGREL BASED ON CYP2C19 GENOTYPE

Authors: **Marta Dogot, Ana Popa**

Scientific adviser: Natalia Capros, MD, PhD, Associate professor, Department of Internal medicine, Clinical synthesis

Nicolae Testemitanu State University of Medicine and Pharmacy of the Republic of Moldova

Introduction. Combined therapy, clopidogrel plus aspirin, prevents secondary thrombotic in acute coronary syndromes (ACS), after percutaneous coronary interventions (PCI) with placement of a coronary artery stent. Clopidogrel is activated in the liver by cytochrome P450 enzymes. CYP2C19 is the principal enzyme. The most common loss-of-function variant is