Mortality down for autoantibody-associated vasculitides patients

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(HealthDay)—From 1999 to 2017, there was a decrease in mortality

among individuals with antineutrophil cytoplasmic autoantibody-associated vasculitides (AAV) in the United States, according to a research letter published online Oct. 8 in the *Annals of Internal Medicine*.

Alexander W. Steinberg, M.D., from Saint Joseph Hospital in Denver, and colleagues evaluated age-adjusted AAV mortality trends across demographic groups and geographic regions in the United States.

The researchers identified 11,316 AAV-related deaths in the United States from 1999 to 2017. Per 1 million persons, the age-adjusted mortality rate was 1.86. The highest mortality rates were seen among non-Hispanic whites, men, and persons in the Midwest. With age, there was an increase in the mortality rate, which was highest among those aged 75 to 84 years; those aged 65 to 74 years had a significant decrease in mortality rate (average annual percent change, –2.5 percent). From 1999 to 2017, the mortality rate decreased by an average of 1.6 percent per year. Eighty-five percent of overall deaths were due to granulomatosis with polyangiitis. Other than vasculitis (64 percent), the three most common underlying causes of death (UCODs) were cardiovascular disease, cancer, and pulmonary disorder (12, 6, and 5 percent, respectively).

"AAV outpaced other UCODs, suggesting that most of these patients died because of AAV or AAV complications," the authors write. "This highlights the importance of continuing efforts to increase clinical awareness and research for development of better targeted therapies for AAV."

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