

Subclinical synovitis may precede arthritis in anti-CCP2+ individuals

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(HealthDay)—Subclinical synovitis frequently precedes the development

of inflammatory arthritis among anti-cyclic citrullinated peptide (CCP) 2-positive at-risk individuals with musculoskeletal symptoms but without clinical synovitis (CCP2⁺ at-risk), according to a study published online Nov. 24 in *Rheumatology*.

Andrea Di Matteo, M.D., Ph.D., from the University of Leeds in the United Kingdom, and colleagues reviewed ultrasound (US) scans of CCP2⁺ at-risk individuals who developed inflammatory [arthritis](#) for subclinical synovitis prior to development of inflammatory arthritis. In addition, predictors of US synovitis in CCP2⁺ at-risk individuals without baseline US abnormalities were identified.

The researchers detected US subclinical synovitis in one or more scans in 77.3 percent of 97 progressors (median time from first evidence of US synovitis to inflammatory arthritis development, 26.5 weeks). Of 220 CCP2⁺ at-risk individuals with normal baseline US scans, US synovitis was detected in 69 (31.4 percent; median time to first developing US synovitis, 56.4 weeks). Only anti-CCP3 antibodies were predictive for [development](#) of US synovitis in a multivariable analysis (odds ratio, 4.75).

"Anti-CCP3 antibodies have a potential role in the identification of CCP2⁺ individuals who are about to develop clinical or subclinical rheumatoid arthritis-related joint inflammation (i.e., before the 'second hit' in rheumatoid arthritis pathogenesis occurs)," the authors write. "This may be the ideal population for interventions to prevent joint disease."

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text](#)

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