

Letter to the Editor

Lipid levels in patients with Behcet's disease

Dear Editor,

We have read the article "Presence of low lipid levels in patients with Behcet's disease (BD) as a protector against atherosclerosis" written by Kayatas et al. with a great interest¹. The authors compared blood lipid levels in healthy controls to those in patients with BD during both their active and inactive stages. They concluded that patients with BD in the active period may be less susceptible to atherogenic events as compared with the controls and those in the inactive period of the disease. Thanks to the authors for their contribution of the present study which is successfully designed and documented.

Behçet's disease is a chronic, multi-systemic, inflammatory process with the clinical features of mucocutaneous lesions, and ocular, vascular, articular, gastrointestinal, neurologic, urogenital, pulmonary, and cardiac involvement². Disease activity method in BD is still very difficult because BD shows fluctuating course, any of laboratory tests don't show overall disease activity. So, study groups of BD in worldwide try to develop new standardized disease activity index. BD current activity form presents an easy, practice and reliable method of assessing disease activity in patients with BD in Turkish population³. In context, if the authors had mentioned the disease activity index, the results of the study may be useful.

This multisystemic disorder primarily affects the vascular system. BD is commonly related to morbidity and mortality accompanied by the vascular system presenting vasculitis, thromboembolism and pulmonary artery aneurysm. Increased inflammatory response in BD may lead to endothelial dysfunction which results in vasculopathy. Therefore, in the present study, the authors did not mention the vascular system findings. Additionally, male sex, a younger age of onset, HLAB51 positivity in BD are associated with vascular involvement and they predict morbidity and mortality in BD⁴. All of these factors may be associated with blood lipid levels. So, it would be better, the authors described these factors.

In conclusion, patients with BD in the active period may be less susceptible to atherogenic events as compared with the controls and those in the inactive period of the disease as presented in current study, however, some factors that can be related to the result of present study were included in the paper. We believe that these findings will evaluate further studies about atherosclerosis in BD patients.

Conflict of Interest

The Authors declare that there are no conflicts of interest.

References

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