

1. Dyslipidemy - as risk factor of cardiovascular comorbidities of systemic lupus erythematosus

Principal investigator: Doc. Ing. Stanislava Blažičková, PhD.

Co-investigators: prof. RNDr. Vladimír Bošák, CSc.

doc. RNDr. Martina Horváthová, PhD.

PhDr. Zuzana Bárdyová, PhD.

Survival of patients with SLE over the past 30 years has improved dramatically. Currently it is experiencing 20 years of diagnosis and 80% of patients. However, the fact that patients with SLE have a higher risk of death than the general population. According Bernatsky(1), which evaluated mortality in a cohort of 9547 patients, the risk of total mortality in these patients and 2.4 times higher than in the general population. The increased mortality in SLE predominantly involved in the infection, cardiovascular diseases. Atherosclerosis is a chronic inflammatory diseases(like SLE) is characterized by activation of cellular immunity, inflammatory formation of plaques. The link between SLE disease activity and atherosclerosis is not fully understood. At the forefront of lipid metabolism in conjunction with the risk of atherosclerosis are getting new molecules such as. Lp-PLA2, FABP4, Apo E, small dense LDL(sLDL), FS NEFA(non-esterified fatty acids), whose levels were in patients with SLE observed so far.