



ANCA in Graves' Disease – Is it Anti-Thyroid Medication-Induced?

Sir,

The article by M M Mehndiratta, et al,¹ entitled "Carbimazole-induced ANCA positive vasculitis" was informative.¹ However, in this case during both episodes steroids have been used. Further, during the first episode the condition improved despite continuing the probable offending drug. Graves' disease itself is an autoimmune disease and autoantibodies other than thyroperoxidase antibodies are not totally unexpected. Though the study by Sera et al, did not find increased anti-MPO titres in untreated patients, studies that have found increased anti-MPO titres in untreated patients need to be mentioned. Gumà M, et al³ have found that 67% of patients with Graves' hyperthyroidism show positive ANCA before medical treatment, which points to a relationship with the autoimmune disease itself. The detection of antineutrophil antibodies in Graves' disease with and without antithyroid medications is known for quite some time.⁴ Thyroid microsomal antigen (mostly thyroperoxidase) and human myeloperoxidase share 44% amino acid sequence homology and cross-reactivity between thyroid microsomal antigen and human myeloperoxidase has been suggested to be an explanation of this phenomenon.⁵ However, later studies^{6,7} have discounted this possibility implying that truly elevated anti-MPO titre is present in untreated patients with Graves' hyperthyroidism.

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Reply from the Author

Sir,

We thank Dr. Benjamin SPE for showing interest in our case report entitled "Carbimazole-Induced ANCA Positive Vasculitis" published in October 2008 issue of JAPI (*J Assoc Physicians India* 2008;56:801-803).

We have diagnosed our case as drug (carbimazole) induced vasculitis as arthritis and skin rash are not features of Graves' disease. In Graves' disease osteopenia and proximal muscle weakness may be seen.¹ Our patient developed arthritis and skin rash only after he was given carbimazole. During the first episode the condition improved but patient took the treatment only for 3 weeks and it has been seen that carbimazole-induced vasculitis may be seen after taking the drug for weeks to months. Apart from long-term use, repeated use of antithyroid medication is also a risk factor for developing this disease.² Steroid was given in our patient as in spite of removing the offending drug patient was very symptomatic. We agree that increased anti-MPO titres may be seen in untreated patients, but in our patient titre normalized after stopping the offending drug.

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Dr J C Patel Medical Research Foundation is organizing Fifth Conference on Iron Deficiency at Shanti Sarovar, Hyderabad on 5 -7 February 2009. Early registration closes on 31/8/09. Only first 150 out-station delegates would be registered and would be provided free accommodation. Local delegates not requiring accommodation will have unrestricted registration. Last date for submission of abstracts for free papers is 15/11/09. All accepted abstracts would receive cash awards based on merits. For details visit our Web-site www.ghrc-bk.org

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