

cílenou na IL-5, kterou se pak doporučuje využít také v léčbě relabujících a refrakterní EGPA.

Závěr

ANCA-asociované vaskulitidy jsou vzácná onemocnění, na něž je vhodné pomýšlet zejména u pacientů s celkovými nespecifickými příznaky, nejasnou elevací zánětlivých parametrů a známkami postižení více

orgánů. Typické jsou chronické rhinosinuitidy, nejasné plicní noduly či infiltráty, krvácení do plic a rychle progredující glomerulonefritida. Diagnóza může být potvrzena pozitivitou ANCA protilátek a/nebo provedením biopsie. V léčbě se uplatňuje kombinovaná imunosupresivní a biologická terapie (kortikosteroidy, cyklofosfamid, rituximab), nutná je individualizace léčebného postupu. Pro vzácnost onemocnění by pacienti měli být sledováni v expertních centrech s dostupností multidisciplinárního týmu.

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