

## **Summary**

New results obtained in my work are the followings:

1. Out of the 362 SLE and 670 SS patients followed-up in our Center, an association of SS and SLE was shown in 56 cases (15.46% of lupus and 8.35% of SS patients).

2. Based on the assessment of a large cohort of patients, we were the first to conclude that SS-SLE had characteristic differences compared to SS or SLE alone. These features include both laboratory alterations and clinical symptoms.

3. There was no characteristic immunogenetic feature of SS-SLE in the examined population. However, positive correlation was detected between antibodies to Ro/SS-A, La/SS-B and HLA-DQB1\*0201.

4. Antibodies to  $\alpha$ -fodrin in the sera of patients suffering from Hashimoto's thyroiditis were detected by us. Moreover, we proved that there was no significant difference between patients with Sjögren's syndrome and Hashimoto's thyroiditis and patients having both diseases simultaneously, regarding the occurrence of IgA isotype antibody to  $\alpha$ -fodrin.

5. There was a middle-grade correlation between the serum level of IgG isotype antibody to  $\alpha$ -fodrin and antibodies to thyroglobulin. This suggests a relationship between the presence of antibodies to  $\alpha$ -fodrin and the pathogenesis of Hashimoto's thyroiditis, since they influence the hormone-secreting activity of the colloid.

6. According to my results, fodrin is likely to play a role not only in the exocrine, but also in the endocrine secretory processes. Antibodies to  $\alpha$ -fodrin might serve as markers of secretory disorders. The clinical significance of these antibodies is in the assessment of the irreversibility of secretion-disorders and aids in the initiation of a proper substitution therapy.

**Keywords:** Sjögren's syndrome, systemic lupus erythematosus, antibodies to  $\alpha$ -fodrin, Hashimoto thyroiditis, secretion disorder, autoantibodies

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**Title of the dissertation:** Associated diseases of Sjögren's syndrome – clinical and immunologic features

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