EDITORIAL



Rheumatology in and from Slovenia

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The central European country of Slovenia is well known for its natural beauty and tourism, but it is perhaps less well known in the field of rheumatology [1]. The 'Rheumatology in Slovenia: Clinical practice and translational research' Collection, demonstrates the growing strength of Slovenian rheumatology. This Collection also demonstrates the wide breadth of Slovenian clinical and scientific endeavour in rheumatology. The articles within this Collection provide insights across the major areas of rheumatology practice and research including epidemiology, connective tissue disorders, vasculitis, sero - epidemiology and genomic medicine.

This Slovenian Collection focuses on clinical practice and scientific communication, thereby reflecting as well as complementing several of the other publications in the field of rheumatology, emanating out of Slovenia [2, 3].

We learn from this current Collection that the incidence of rheumatoid arthritis in Slovenia is comparable to the incidence of the disorder in Southern Europe. In addition, whilst there is still more to be done, the emergence of early interventional clinics in Slovenia is already beginning to yield dividends both with achieving an early diagnosis of rheumatoid arthritis as well as with the timely commencement of disease modifying anti rheumatoid drugs for these patients. Another epidemiological study shows that in Slovenia, there is an incidence rate for the inflammatory myopathies consistent with the literature.

In Slovenia, Giant Cell Arteritis (GCA) has been found to be the commonest form of vasculitis in adults over the age of 50 years with an incidence rate comparable to that of GCA in Southern Europe. Fortunately, the condition is being diagnosed and treated early through a fast track GCA service which

Rheumatology in Slovenia: Clinical practice and translational research

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utilises temporal artery biopsy, colour Doppler sonography and where necessary, positron emission tomography (PET) scanning. Laboratory studies of the condition are identifying serological markers as well as potential candidate biomarkers in the temporal artery biopsies of GCA patients using quantitative PCR, all of which will serve to facilitate prompt diagnosis of the condition in the future.

The results of several other laboratory studies are reported in this Collection. One study demonstrates that a modified fluorescent Farr method for measuring double stranded DNA antibodies compares favourably with the traditional Farr radioimmunoassay. In other studies, antiphospholipid antibodies have been found to have potentially important associations with both cerebrovascular events as well as IgA vasculitis, whilst non criteria antiphospholipid antibodies have also been found to be important serological markers for the antiphospholipid antibody syndrome.

Thus, this Collection provides information that is of national, regional and, in particular, of international interest and importance in the field of Rheumatology. We believe that the Collection points to a continuing significant contribution that Slovenia rheumatology will increasingly make to the global rheumatology community.

Compliance with ethical standards

Disclosures None.

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