









La Société Tunisienne de Gériatrie & le syndicat Tunisien des médecins libéraux de Médenine organisent :

Congrès Franco-Tunisien de gériatrie
Congrès National de la Société Tunisienne de Gériatrie

3<sup>ème</sup>
Journée de Gériatrie du Sud

# Benefits of Temporal Artery Biopsy (TAB) in diagnosis of Giant cell arteritis (GCA)

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### Introduction:

Giant cell arteritis (GCA) is the most common systemic vasculitis that affects the elderly. It has variable clinical presentation. The greatest risk factor for developing GCA is aging. Temporal artery biopsy (TAB) is a useful procedure that helps in the diagnosis but unfortunately, it lacks sensitivity.

#### **Materials and Methods**:

Here we report a study of 20 patients, 6 male and 14 female averagely aged 70 years [52-86] in whom the diagnosis of GCA was established on clinical grounds and/or TAB.

#### **Results:**

Among typical symptoms of new-onset GCA, we noticed bitemporal headaches in 85 % (n=17), jaw claudicating in 20% (n=4), scalp tenderness in 20% (n=4), systemic symptoms such as fever, weight loss and polymyalgia in 45% (n=9) and ocular manifestation such as anterior ischemic optic neuropathy in 30% (n=6), occlusion of a retinal central artery in 15%(n=3) and occlusion of a retinal central vein in 5%(n=1). Laboratory testing revealed elevated C-reactive protein and erythrocyte sedimentation rate in 85% (n=15). TAB performed in 80% (n=16) found typical inflammation with panarteritis in 35% (n=7). It showed fibrosis endarteritis in 20% (n=20) normal tissue in 20% (n=4) and it was non contributive in 5% (n=1). Patients who had ocular manifestation didn't have significantly much positive temporal artery biopsies (p= 0.24). Standard treatment of GCA was corticosteroids.

## Discussion and conclusion:

Only 20 percent of temporal artery biopsies were positive even though patients met the American College of Rheumatology diagnostic criteria for giant cell arterities which was concordant to our results (35%). TAB still has its place when a diagnostic doubt exists, but also when recommended imaging modalities are not available. It will remain the standard tool for diagnosis giant cell arteritis and may be used in conjunction with modern imaging techniques. However, it can be falsely negative which was making to us problem diagnosis.

