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I feel it in my fingers, I feel it in my toes, rheumatism that's all around me . . .

Yes, we started this editorial with St Valentine's day memories. Love and rheumatism make the special feeling in toes and fingers. But, obviously Wet Wet Wet's romantic song is not a subject we want to discuss.

This first 2023 issue brings a bunch of new information on the pathogenesis of rheumatic diseases. In line with it Witoszyńska-Sobkowiak et al discussed the serotonin-kynurenine metabolic axis [1]. The kynurenine-serotonin axis is the metabolic pathway where the amino acid L-tryptophan is metabolized to nicotinamide [2]. The pathophysiological consequence of this conversion goes far beyond meeting the body's nicotinamide requirements. L-tryptophan plays an essential role as a rate-limiting compound essential for protein synthesis and thus cell division. T cells are able to modulate the L-tryptophan concentration *via* regulation of general control nonderepressible 2 (GCN2 kinase) activity, a serine/threonine-protein kinase that is responsible for control amino acid deficiencies, activation of which results in antiproliferative and apoptotic effects. The latest is combined with the ability to rapidly reduce tryptophan content in the micro-environment *via* preferential transformation to nicotinamide.

The rate-limiting enzyme is indoleamine 2,3-dioxygenase a key enzyme responsible for tryptophan/kynurenine transformation. This step is potentially regulated by interferon activity thus providing a negative feedback loop during immune stimulation [3]. This may bring many pathophysiological consequences. Kynurenine-pathway is believed to play an essential role in driving and supporting inflamma-

tion and aberrant immune response in several rheumatic conditions as rheumatoid arthritis, spondyloarthropathies, systemic sclerosis, and many others. The paper of Witoszyńska-Sobkowiak is an excellent example of understanding the close link between metabolic pathways and immune system functioning. Without this knowledge, it is difficult to understand the pathophysiological milieu in which the immune system works [4]. Kynurenine-serotonin axis is believed to play a role also in systemic sclerosis. The latest disease has been discussed in the light of diagnostic procedures that helps to make a final diagnosis. As far as systemic sclerosis is concerned capillaroscopic examination is one of the most important imaging procedures commonly used as a key element of classification criteria as well as an essential element of VEDOSS philosophy. Indeed, capillaroscopic examination in early diagnosis of systemic sclerosis is one among must to be procedures. Wielosz in her review discussed in detail the application of this technique [5]. The added value of this paper is a detailed discussion on changing capillaroscopic pattern in the course of the disease. In the other words, the capillaroscopic picture changes parallel to the development of the disease. All of you are cordially welcomed to join the Author in her way toward recognition of the disease.

Connective tissue disorders belong to the most interesting problems in present rheumatology. At the moment we can efficaciously treat flares of diseases and prevent many complications that in past contributed to generally poor prognoses. At the moment one of the most important challenges in the treatment

of this group of diseases is premature atherosclerosis and its fatal complication. As a result awareness of atherosclerotic heart disease and strokes among patients suffering from connective tissue diseases attract high attention. To address this Kowynia et al. [6] performed an extensive review of the lipid metabolism disturbances in systemic lupus erythematosus. The problem of premature atherosclerosis and so-called bimodal pattern of mortality with the second peak attributable to atherosclerosis and premature cardiovascular death is a well-known clinical entity since the mid-seventies of the last century. With almost fifty years passing it still attracts high attention of rheumatologists and cardiologists. The lipids metabolism disturbance is both related and unrelated to the disease activity. With a plethora of metabolic and immune pathways actively blocked or simply modulated in the course of the disease the treatment of lipid profile abnormalities is still challenging. The authors, however, put special attention to the simplest approach; nonpharmacological treatment with modification of the lifestyle, physical activity, and proper diet application.

Non-pharmacological treatment may not be entirely effective as far as rheumatoid treatment is concerned. The latest update of EULAR guidelines for the treatment of rheumatoid arthritis still underlying the role of early introduction of methotrexate (MTX) for the treatment of rheumatoid arthritis (RA) patients. The up-to-date information on its safety and efficacy has been received by the rheumatology team from Śrem. Additionally, Chudala

et al. provided data on MTX concentration and its bioavailability in 154 patients with RA [7]. They concluded that MTX is rapidly metabolized in the body in most patients when doses are used according to current guidelines. They also stated that assessment of serum MTX levels might be useful when drug intoxication is suspected and finally assessment of serum MTX levels may be useful to confirm appropriate patient cooperation.

We are happy to host students and young rheumatologists. This philosophy is perfectly matched by the publication of works prepared by students' scientific societies. The last paper in this issue presents the case reports of adult-onset Still disease complicated by macrophage activation syndrome [8]. The real challenge was the presence of actinomycosis-like lung infiltrates that makes making the final diagnosis difficult.

The quality of life in rheumatology still attracts high attention. In modern times it is not enough to treat patients sufficiently but also tries to provide them with as high live quality as we can. The aesthetic aspect of the disease is still a great problem since many rheumatic diseases have a great negative impact on the aesthetic aspects of the body. In their elegant review, Waldheim et al. focused on nails and scalp appearance in the course of skin psoriasis. They also discussed the up-to-date treatment strategies [9].

CONFLICT OF INTEREST

None declared.

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