

**Reply to the comment on:
Imaging is the major
determinant in the
assessment of disease activity
in Takayasu's arteritis**
by Li Cavoli *et al.*

Sirs,

We have read the comment by Li Cavoli *et al.* (1) and we thank them for their interest in our article. Previously, we developed the scoring of ITAS-A-Rad including imaging items for the assessment of disease activity in Takayasu's arteritis (TAK) (2). In this score we suggested using both B-mode Doppler ultrasonography (US) and magnetic resonance imaging (MRI/MRA) as the first-line imaging modalities. In the US examinations we took into account new or worsening vessel wall thickness within the past 3-6 months in the assessment of radiologic activity of the patients with TAK. In the MR examinations, we accepted the presence of mural contrast enhancement/edema as a disease activity indicator, independently from the previous MRI.

We suggested that vascular imaging should be included in the assessment of disease activity in TAK. And our study showed that radiologic disease activity parameters obtained by using US and MRI/MRA correlated well with the criteria of the National Institutes of Health (NIH) and Physician Global Assessments (PGA) in patients with TAK.

Monitoring the deeper vessels is important because of the considerable prevalence of their involvement in patients with TAK, and MRI/MRA has superiority for imaging deeper vessels, as Li Cavoli *et al.* mentioned. Computer tomography angiography (CTA) and MRA show similar findings for deep vessels but CTA is associated with significant radiation exposure as a condition limiting serial imaging at certain intervals. So we recommend using 6-12 monthly MRI/MRA examinations in order to determine the activity status of the deeper vessels.

As a result, using vascular US in combination with MRI/MRA provides to determine active inflammation without missing any large arteries in patients with TAK, also without exposure to any radiation.

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Competing interests: none declared.

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References

1. LI CAVOLI, FINAZZO F, TORTORICI C *et al.*: Comment on: Imaging is the major determinant in the assessment of disease activity in Takayasu's arteritis. *Clin Exp Rheumatol* 2021; 39 (Suppl. 129): S186.
2. KENAR G, KARAMAN S, ÇETIN P *et al.*: Imaging is the major determinant in the assessment of disease activity in Takayasu's arteritis. *Clin Exp Rheumatol* 2020; 38 (Suppl. 124): S55-60.