**Materials and Methods**

*Patients*

We retrospectively reviewed the medical records of patients with BD who were followed at the BD polyclinic from 1994 to 2014. We included 840 patients who had provided sufficient data. All of the patients were diagnosed with BD according to the Behçet's Syndrome International Study Group Criteria [7]. Only first-degree relatives (brothers, sisters and parents) who were affected were considered to constitute cases of familial BD [14–16].

*Methods*

We were also able to obtain demographic data such as age, gender, age of onset, symptoms experienced, age at diagnosis, and clinical findings including oral aphthae, genital ulcers, papulopustular lesions, nodular lesions, pathergy reactions, and the involvement of the ocular, central nervous, musculoskeletal, cardiovascular, and genitourinary systems from the medical records. We examined the initial findings and systemic involvements using records from other departments that the patients had consulted. For the control group, we chose 45 patients similar in gender and age at random from the sporadic BD patient group (Fig. 1).

*Statistical Analyses*

The data analysis was performed using SPSS for Windows Version 20.0 (SPSS Inc., Chicago, IL, USA). Means ± standard deviation were calculated for continuous variables, while percentiles and frequencies were reported for categorical variables.Categorical variables were given with cross-tabulations. Pearson’s and Fisher’s χ2 tests were used to demonstrate the differences between the two groups. We used a significance level of *p* < 0.05 in our study.