Kidney involvement, high anti-dsDNA predict lupus flares

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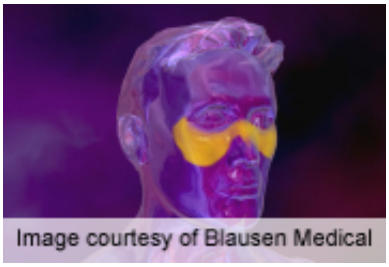

Kidney involvement and high anti-double stranded DNA are independent predictors of moderate-severe lupus flare, according to research published online June 10 in *Arthritis & Rheumatism*.

(HealthDay)—Kidney involvement and high anti-double stranded (ds) DNA are independent predictors of moderate-severe lupus flare, according to research published online June 10 in *Arthritis & Rheumatism*.

Michelle A. Petri, M.D., from Johns Hopkins University in Baltimore, and colleagues conducted post-hoc analysis to assess baseline demographics, disease activity, and biomarkers in 562 patients, treated with standard therapy alone, with and without flare at treatment weeks 24/52. Severe and moderate flares were defined using the modified SLE Flare Index (SFI) and the new British Isles Lupus Assessment Group (BILAG) A/B scores.

The researchers found that over 52 weeks the frequencies of SFI, BILAG 1A, and BILAG 1A/2B flares were 24, 23, and 32 percent, respectively. Using all three indices, in univariate analyses, predictors of flares at weeks 24/52 included: Safety of Estrogens in Lupus Erythematosus National Assessment-SLE Disease Activity Index (SELENA-SLEDAI) ?12, anti-dsDNA positivity and proteinuria (?0.5 g/24 hours); BILAG renal, vasculitic, and hematologic scores; increased C-reactive protein; and B-lymphocyte stimulator (BLyS) ?2 ng/mL. In multivariate analysis, independent predictors at week 52 included: SELENA-SLEDAI/BILAG renal involvement and anti-dsDNA ?200 IU/mL (all three indices); SELENA-SLEDAI/BILAG neurologic and vasculitic involvement (BILAG A/2 B or 1A scores); BLyS ?2 ng/mL (SFI and BILAG 1A/2B scores); and low complement 3 (SFI).

"In summary, anti-dsDNA ?200 IU/mL and renal organ involvement at baseline were independent predictors of moderate-severe SLE flare at week 52 on all three flare indices," the authors write. "Close monitoring of patients with disease activity or biomarkers predictive of SLE flare may improve their care and long-term outcomes."

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More information: Abstract
Full Text (subscription or payment may be required)