

Updated systemic lupus erythematosus management recommendations

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Systemic lupus erythematosus (SLE) is a heterogeneous disease, which can cause many different manifestations and symptoms, and traditionally did not have many treatment options. However, the picture is changing, and clinical practice must change accordingly, to keep up with modern treatment options and to make the most of new drugs that can target key pathophysiological pathways. In line with this, EULAR has updated its recommendations for managing SLE.

The updated recommendations were developed by a multidisciplinary task force of patient research partners and health care professionals. The work was completed in line with EULAR standardized operating procedures. All information included in the final publication—published in the October 2023 issue of the [*Annals of the Rheumatic Diseases*](#)—was based on a systematic literature review.

Overall, five overarching principles and 13 recommendations were developed. The principles reinforce the need for multidisciplinary, individualized management alongside patient education and shared decision-making—and suggest considering both patient and societal costs. It is recommended that disease activity be assessed at each clinic visit, and organ damage checked at least annually. Non-pharmacological interventions can have an impact and improve long-term outcomes.

Pharmacological treatments should be chosen based on each person's individual characteristics and preferences, as well as their disease type, severity of organ involvement, and any comorbidities. Early diagnosis, regular screening for new organ manifestations, prompt treatment,—and strict adherence to the latter—are essential to prevent flares and organ damage, as well as to improve the long-term outcome, and enhance

people's quality of life.

The individual recommendations cover treatment choices for specific circumstances, such as when people have kidney or nervous system involvement in their disease. Guidance is also given around dosing and timing for glucocorticoids, use of conventional and biologic immunosuppressive drugs, and how and when to taper treatment once response is achieved.

These recommendations represent the current state-of-the-art guidance for SLE, and EULAR hopes they will provide [guidance](#) on pharmacological interventions for physicians around the world—and for their patients with SLE.

More information: Antonis Fanouriakis et al, EULAR recommendations for the management of systemic lupus erythematosus: 2023 update, *Annals of the Rheumatic Diseases* (2023). [DOI: 10.1136/ard-2023-224762](#)

Provided by EULAR

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