

Abstract 447 Table 1

Physician-Behavioral Metrics		1/1/2015 to 6/31/2015	1/1/2016 to 6/31/2016	Z-Test for Proportions (Independent Groups)
Metric 1	Rate of SLE patients having office visits at least 1x/6 months.	42.0%	48.7%	Statistically Significant Difference 95% confidence (p = .0318)
Metric 2	Rate of SLEDAI application at least 1x/6 months.	13.8%	18.7%	Statistically Significant Difference 95% confidence (p = .0341)
Metric 3	Rate of administration of influenza vaccination in the last 12 months.	13.9%	18.0%	Statistically Significant Difference 90% confidence (p = .0740)
Metric 4	Rate of administration of pneumococcal vaccination (ever)	30.4%	31.5%	Not Statistically Significant
Metric 5	Rate of patients with prednisone dose > 7.5 mg/day.	11.5%	7.4%	Statistically Significant Difference 95% confidence (p = .0254)

Abstract 447 Table 2

Patient Outcomes Metrics		1/1/2015 to 6/31/2015	1/1/2016 to 6/31/2016	Z-Test for Proportions (Independent Groups)
Metric 6	Rate of hospitalization among all lupus patients	5.9%	3.7%	Statistically Significant Difference 85% confidence (p = .1006)

- Patient Campaigning: Identification of patients who are due for various SLE-specific testing or management activities and proactive contact in order to prompt an office visit.

Results We demonstrated a “tighter” management of SLE patients through statistically significant improvement in the rate of key SLE management behaviours (95% CI).

“Tighter” management, in turn, prompted statistically significant improvement in hospitalisation (85% CI).

Conclusions Time-structured, IT-enhanced, and QI indicator-driven interventional modalities prompted a more frequent, more comprehensive, and guideline-adherent point of care interaction with SLE patients (i.e. “tighter” management). “Tighter” management manifested as improved patient outcomes in the form of a diminished rate of hospitalisation among SLE patients.

448 BONE MARROW MEGAKARYOCYTES MAY PREDICT THERAPEUTIC RESPONSE OF SEVERE THROMBOCYTOPENIA IN PATIENTS WITH SYSTEMIC LUPUS ERYTHEMATOSUS

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Background and aims To analyse the predictive value of megakaryocyte counts in bone marrow (BM-MK) for determining the therapeutic response of severe thrombocytopenia (TP) in patients with systemic lupus erythematosus (SLE).

Methods Thirty-five patients with SLE with severe TP (platelet count $\leq 50 \times 10^9/l$) from the Peking Union Medical College Hospital admitted between 2007 and 2014 with appreciable bone marrow aspiration results were analysed retrospectively. The associations between therapeutic response and clinical

manifestations, laboratory findings including BM-MK counts, were evaluated.

Results Seventeen (49%) and 8 (23%) patients achieved a complete response (CR) and a partial response (PR), respectively, and 10 had no response (NR). The BM-MK counts in each group were 102 ± 25 (0–322), 136 ± 48 (2–419), and 28 ± 12 (0–105) per slide, respectively. Significant differences were observed in the counts of BM-MK between patients who achieved a clinical response (CR + PR) and those who did not (NR; $p=0.007$). Patients in the NR group exhibited fewer BM-MK compared with those in the CR and PR groups ($p=0.017$ and $p=0.006$, respectively). A receiver-operation characteristic analysis identified that a cutoff value of BM-MK counts at 20 performed pretty well in discriminating patients with differential responses to immunotherapy, with sensitivity and specificity and area under the curve of 88%, 70%, and 0.798, respectively.

Conclusions BM-MK count may serve as a good predicting factor for immunotherapeutic response in patients with SLE with severe TP. Patients with BM-MK counts <20 per slide tend to exhibit poor clinical response.

449 EFFECT OF DISEASE REMISSION ON ORGAN DAMAGE AND QUALITY OF LIFE IN CHINESE PATIENTS WITH SYSTEMIC LUPUS ERYTHEMATOSUS

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Background and aims To study the effect of disease remission on organ damage and quality of life(QOL) in Chinese patients with SLE.

Methods Adult patients who fulfilled the ACR criteria for SLE were identified and their remission status at last visits was