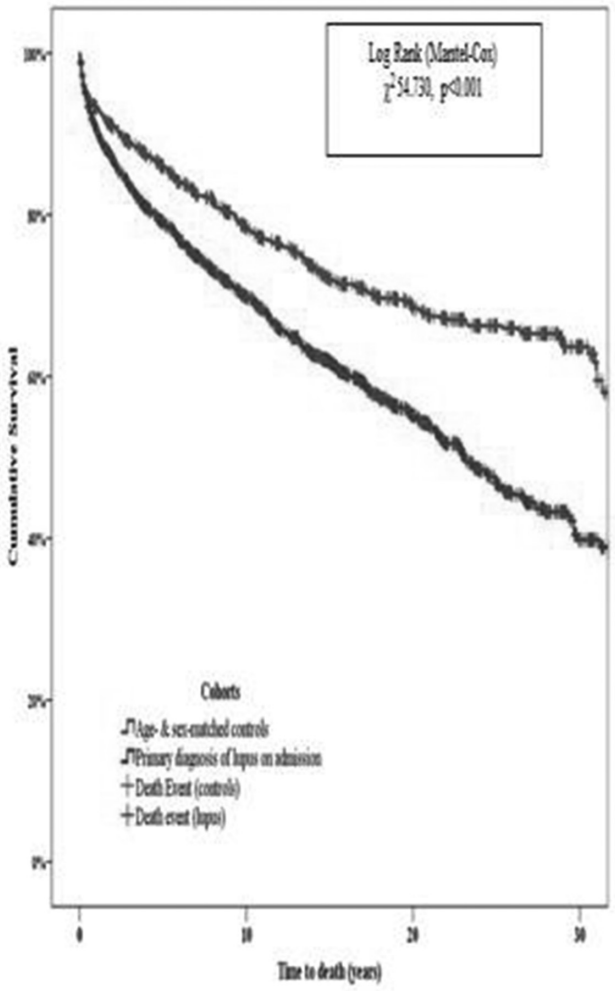
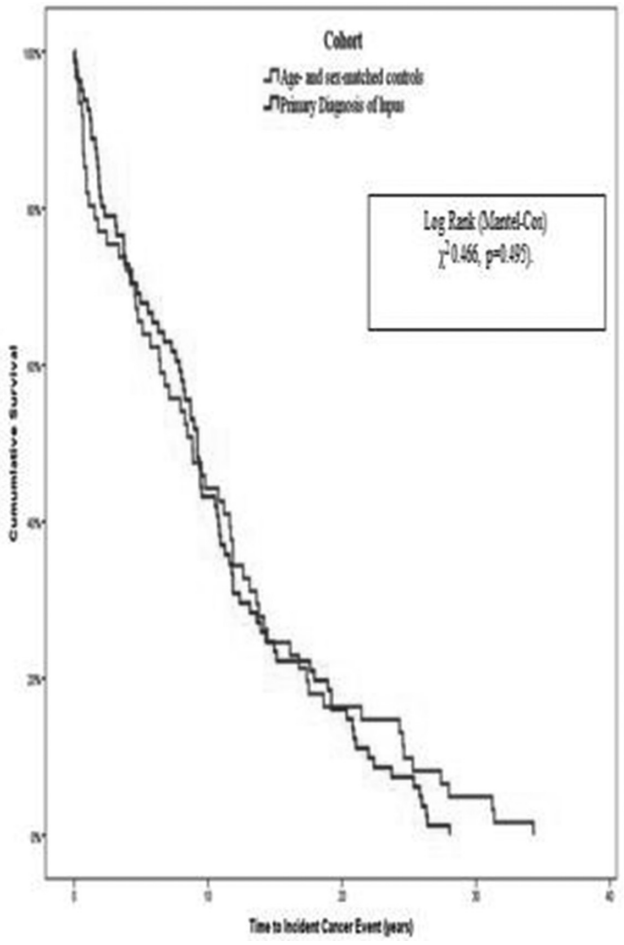


Abstract 419 Figure 1 Kalpan-Meier survival analysis of all-cause motality for SLE patients and age- and sex- matched controls (free of rheumatic disease) from index hospitalisation.



Abstract 419 Figure 2 Kalpan-Meier survival analysis of cancer outcomes for SLE patients and age- & sex-matched controls (free of rheumatic disease conditions) from incident hospitalisation.

Reliability as measured by the JAMA benchmarks was average to poor.

The readability is higher than recommended for the general public, which may limit understanding.

This assessment highlights the need for clinicians to provide patients with alternative sources of high quality information regarding SLE.

422 ANTI-RNP/SM ANTIBODIES PLUS LUPUS ANTICOAGULANT AS RISK FACTOR FOR THROMBOSIS IN PATIENTS WITH SYSTEMIC LUPUS ERYTHEMATOSUS

[1]MC Zamora-Medina*,[1]A Hinojosa-Azaola, [2]AG Vargas-Ruiz, [1]J Sanchez-Guerrero, [1]C Nunez-Alvarez, [1]J Romero-Diaz. *[1]Instituto Nacional de Ciencias Medicas y Nutricion S.Z., Immunology and Rheumatology, Mexico city, Mexico*; *[2]Instituto Nacional de Ciencias Medicas y Nutricion S.Z., Haematology, Mexico city, Mexico*

10.1136/lupus-2017-000215.422

Background and aims Thrombosis still remains as main cause of morbidity and mortality in SLE patients. Results from a recent study identified a strong association of anti-RNP/Sm abs+LA with thrombosis. We aimed to validate this association

Methods We studied 63 SLE patients (>4 criteria/ACR) with confirmed history of thrombosis after SLE diagnosis. As controls, 63 SLE patients without thrombosis, matched by age, gender and lupus duration were included. Disease characteristics, medication, traditional risk factors for thrombosis and thrombotic event information were retrieved from clinical files. A blood sample was drawn to determine anti-cardiolipin (IgG/IgM), antiß2-GP1 (IgG/IgM), LA, anti-RNP/Sm and anti-Sm antibodies. Sensitivity, specificity, positive and negative predictive values (PPV, NPV) and Likelihood Ratios (LR) were calculated.

Results One hundred and twenty six SLE patients were studied. Cases and controls were similar in age, gender and disease duration (p=NS). There were no differences in the prevalence of traditional risk factor for thrombosis between cases and controls (p=NS). Among patients with thrombosis a higher frequency of anti-RNP/Sm (83% vs 62%, p<0.001), LA (62% vs 19%, p<0.001), aPL triple marker (17% vs 2%, p=0.04) and anti-RNP/Sm+AL combination (52% vs 14%, p<0.001) was observed. The combination of anti-RNP/Sm +AL showed a sensitivity 52%,specificity 86%, PPV 78% and NPV 65%, positive LR 3.67 (IC 95% 1.92–7.04) and negative LR 0.55 (IC 95% 0.42–0.74).

Conclusions This study confirmed that anti-RNP/Sm+LA association represents a risk factor for thrombosis in SLE patients.

Abstract 419 Table 2 Cox Regression analysis results for mortality risk factors in SLE patients with incident hospital admissions compared to controls.

Univariate Cox Regression				
	Hazard Ratio	95.0% CI for Exp(B)		P-value
		Lower	Upper	
Lupus Diagnosis	1.656	1.447	1.895	<0.001
Multivariate Cox Regression				
	Hazard Ratio	95.0% CI for Exp(B)		P-value
		Lower	Upper	
Lupus Diagnosis	1.991	1.473	2.693	<0.001
Age	1.070	1.060	1.080	<0.001
Year of Incident Hospitalisation	1.047	1.007	1.088	0.020
Males	1.357	1.022	1.802	0.035
Length of Stay	1.016	1.006	1.026	<0.001
Uninsured	1.648	1.389	1.956	0.001

The role of anti-RNP/Sm antibodies in thrombosis deserves further studies

423 INDONESIAN EPIDEMIOLOGIC DATA OF PAEDIATRIC SYSTEMIC LUPUS ERYTHEMATOSUS

[1,2]B Setiabudiawan*, [1]R Ghrahani. [1]*Faculty of Medicine Universitas Padjadjaran, Child Health- Allergy Immunology Division, Bandung, Indonesia*; [2]*Chairman of Allergy Immunology, Working Group Indonesian Paediatric Society, Jakarta, Indonesia*

10.1136/lupus-2017-000215.423

Background and aims To estimate the epidemiological data of paediatrics systemic lupus erythematosus (SLE) in Indonesia.
Methods A nationwide prospective registry study for the epidemiological data of paediatric SLE was undertaken in Indonesia. Registry data from health service centres in 12 provinces were collected through online registry database since 2012.
Results Two hundred and ten cases of paediatric SLE were identified during the period of 2012–2015. The SLE frequency in girls was 9 times higher than in boys (18:172). The mean age was 11.2±3.2 years, with the peak incidence in 13 years old. Most patients were from West Java province, followed by North Sumatra, Jakarta, and South Sulawesi provinces, respectively. The chief complaints were mostly fever, skin disorder, and paleness.
Conclusions This national registry of paediatric SLE in Indonesia provided a good starting point to improve our understanding of the epidemiology of autoimmune diseases in Indonesia. Diagnosis and documentation of this disease are difficult due to challenges in disease recognition and lack of diagnostic facilities; hence, there is a possibility that SLE cases are underdiagnosed in some provinces. Future studies are needed to gain more comprehensive data on nationwide epidemiology of SLE.

424 COULD PRETERM DELIVERY BE A SURROGATE MARKER FOR ACCELERATED DEVELOPMENT OF CARDIOVASCULAR EVENTS IN WOMEN WITH SLE?

[1,2,3,4]MC Soh*,[3]C Nelson-Piercy, [1]L McCowan, [5]M Westgren, [3]D Pasupathy. [1]*University of Auckland, Department of Obstetrics and Gynaecology, Auckland, New Zealand*; [2]*Imperial College NHS Trust, Obstetric Medicine Department- Queen Charlotte's and Chelsea Hospital, London, UK*; [3]*King's College London, Women's Health Academic Centre, London, UK*; [4]*Oxford University Hospitals NHS Foundation Trust, Silver Star High-Risk Pregnancy Unit- John Radcliffe Hospital, Oxford, UK*; [5]*Karolinska Insitute, Department of Clinical Science- Intervention and Technology CLINTEC- H9, Stockholm, Sweden*

10.1136/lupus-2017-000215.424