associated with a reduced risk of remission and remission/LLDAS; lower socioeconomic status was associated with a reduced risk of remission. A medium prednisone dose was associated with an increased risk of remission/LLDAS.

Background and aims Vitamin D has important roles in the regulation of the immune system in Lupus. Seventy percent of lupus patients in Indonesia are experienced hypovitamin D. Curcumin is a natural VDR ligand and has synergic effect with vitamin D. This study was aimed to determine the effect of adding curcumin on vitamin D supplementation on the degree of disease activity and degree of fatigue, in SLE patients with hypovitamin D.

Methods This was a randomised controlled trial, double blind study. Forty SLE patients with hypovitamin D were studied, that randomized into two groups: 20 patients (supplementation group) received vitamin D (cholecalciferol 1200 IU daily) with curcumin 20 mg (three times daily); and 20 patients (placebo group) was given vitamin D (cholecalciferol 1200 IU daily) and placebo (3 times daily), for 3 months. Disease activity is determined by the SLEDAI scores and the degree of fatigue is determined by the FSS (Fatigue Severity Scale).

Results After supplementation for 3 months, this study showed that decreased of SLEDAI score in the supplementation group was greater than the placebo group. The decreased of FSS in the supplementation group was also greater than the placebo group.

Conclusions Adding curcumin on vitamin D supplementation, decreased SLEDAI scores and FSS greater than vitamin D supplementation plus placebo in SLE patients with hypovitamin D.