was 37.37±13.96 years old, the average duration was 6.7 ±5.8 years. Among them, 310 patients were in glucocorticoid maintenance stage. 61% of patients received the medium dosage (30–60 mg/d) as the initial treatment dosage of glucocorticoid. However, patients receiving different initial dosage had no discrepancy on glucocorticoid in the maintenance therapy. In the maintenance stage, 51% of patients received 2.5–5 mg/d prednisone, while the dosage of 5–10 mg/d could maintain for a longer time. Patients with internal organs involvement had a higher tendency to receive 60–100 mg/d or pulse-dose therapy in the initial treatment, nevertheless there had no difference on the dosage of glucocorticoid in the maintenance stage. Among the 400 patients, 62 patients had glucocorticoid withdrawal, including 17 patients due to disease remission (17/400, 4.25%), 44 patients due to self-withdrawal (44/400, 11%) and one patient due to adverse reaction (1/400, 0.25%).

**Conclusions**

In China, the medium dosage of glucocorticoid is the most common choice in the initial treatment of SLE patients, and the dosage of 2.5–5 mg/d was most common in maintenance stage. Currently, the proportion of glucocorticoid withdrawal remains low after SLE patients achieving the remission.

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**Table:**

<table>
<thead>
<tr>
<th>Patient Group</th>
<th>Description</th>
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<tbody>
<tr>
<td>Prednisone</td>
<td>2.5–5 mg/d</td>
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<tr>
<td>Prednisone</td>
<td>5–10 mg/d</td>
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<tr>
<td>Prednisone</td>
<td>60–100 mg/d</td>
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### Abstracts

**388** CHARACTERISATION OF PATIENTS WITH SYSTEMIC LUPUS ERYTHEMATOSUS WHO WERE ADMITTED TO A UNIVERSITY HOSPITAL IN BOGOTA-COLOMBIA BETWEEN 2008 AND 2016

J. Aponte, A. Cartagena, J. Carrizosa, A. Sanchez, MT Osuna, C. Gamboa, R. Cervera.

Background and aims: Systemic lupus erythematosus is one of the most prevalent autoimmune disease, and it is associated with many complications, morbidity and mortality. The mortality in these patients is related with immune activity, infectious complication and a direct effect of pharmacology therapy. All these factors result in target organ injury.

Methods: A retrospective-descriptive study of patients admitted to the intensive care unit of the Hospital Universitario de la Samaritana between 2008 and 2016 in the city of Bogota was performed. The aim of this study was to characterise the clinical, demographic and paraclinical features of patients with systemic lupus erythematosus.

Results: 56 cases were collected, most of the patients were relatively young with an average age of 40.7 years (SD ±17.7 y/o). These people were mainly female (71% vs 29%). The immune activity was measured with score SELENA SLEDAI with average 16.5 (SD ±4.3), in the analysis of target organ 69% of patient had lupus nephritis, 42% haematological commitment, 28% lung injury, 17% neurological complications and 48.25% had infectious process. When it comes to the days of mechanical ventilation, the average was 9 (SD ±10), days of ICU stay 13.7 (SD ±14.3) and finally the mortality was 39.2%.

Conclusions: At ICU of our hospital, the prevalence of patients with systemic lupus erythematosus tends to be more frequent than in other series reported, this information may be useful in future studies and can also reduce complications and mortality in this population.

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**390** OUTCOMES OF PREGNANCY OF KYRGYZ SLE PATIENTS


Background and aims: To study outcomes of pregnancy of Kyrgyz SLE patients.

Methods: Included 75 patients with SLE passed the examination in the clinic NCCIM from 2001 to 2011. Age of women was 30 [20; 40] years old, duration of the disease on the 1st point-3 [0.8; 40] years. Assessed disease activity by SLEDAI 2K 1st point and the end point after an average of 6.38 ±3.48 years.