decreased breath sounds over lung bases, a systolic murmur over the apex, and significant contractures on elbows and knees. She was coherent, oriented to all spheres, with intact cranial nerves, but with impaired recall. Upper extremity muscle testing was 4/5, while that of the lower extremities were 3/5. There was severe muscle atrophy, no fasciculations or other involuntary movements, no sensory deficits, no abnormal reflexes, and no signs of meningeal irritation. No oral ulcers, joint swelling, nor rash was noted. Work up showed anaemia, leukopenia, positive ANA, and positive anti-dsDNA. Serum electrolytes and urinalysis were normal. Chest radiograph showed interstitial infiltrates, while Mantoux test was negative. Cranial magnetic resonance imaging with contrast showed abnormal white matter intensities at the frontoparietal, periventricular, and subcortical regions, communicating hydrocephalus, and cortical cerebral and cerebellar atrophy. Cerebrospinal fluid analysis was normal. She showed remarkable improvement with intravenous antibiotics and corticosteroids. Upon discharge, she had good well-being, appetite, cognition, and mood, and was already able to ambulate with assistance. She received cyclophosphamide pulse therapy and underwent physical rehabilitation.

Conclusions Normal-pressure hydrocephalus may be part of the presenting manifestations of paediatric SLE.

Conclusions A modified regimen of 9 monthly and 5 quarterly cyclophosphamide pulses may be an effective therapeutic option for childhood-onset LN.

Background and Aims The current therapeutic strategy for childhood-onset lupus nephritis (LN) involves an induction phase, aiming to promote remission, and a maintenance phase to control disease and prevent relapses. Various regimens have been used worldwide, which differ in drug of choice and dosage, and duration of the induction and maintenance phases. This study evaluated treatment outcome and adverse event occurrence in Filipinos with childhood-onset LN.

Methods Medical records of patients diagnosed with childhood-onset LN who received an extended induction phase of 9 months followed by a maintenance phase of 5 quarterly intravenous cyclophosphamide pulses from year 2006 to 2014 at the University of Santo Tomas Hospital were reviewed.

Results Nineteen patients completed the modified regimen (94.7% female, mean age 11.2±3.7 years at lupus diagnosis, mean LN duration to completion of treatment 30.6±5.2 months). At 9 months, 47.4% (9/19) reached complete remission, and 52.6% (10/19) were in partial remission. After 9 monthly and 5 quarterly pulses, 94.7% (18/19) was with complete treatment response. One patient relapsed during the maintenance phase and was with partial response at the end of treatment. The random urine protein:creatinine ratio and random urine albumin:creatinine ratio were 3/5. There was severe muscle atrophy, no fasciculations or other involuntary movements, no sensory deficits, no abnormal reflexes, and no signs of meningeal irritation. No oral ulcers, joint swelling, nor rash was noted. Work up showed anaemia, leukopenia, positive ANA, and positive anti-dsDNA. Serum electrolytes and urinalysis were normal. Chest radiograph showed interstitial infiltrates, while Mantoux test was negative. Cranial magnetic resonance imaging with contrast showed abnormal white matter intensities at the frontoparietal, periventricular, and subcortical regions, communicating hydrocephalus, and cortical cerebral and cerebellar atrophy. Cerebrospinal fluid analysis was normal. She showed remarkable improvement with intravenous antibiotics and corticosteroids. Upon discharge, she had good well-being, appetite, cognition, and mood, and was already able to ambulate with assistance. She received cyclophosphamide pulse therapy and underwent physical rehabilitation.

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This study aimed to evaluate serum level of sCXCL16 in patients with juvenile SLE (jSLE) for possible value of its estimation in assessing the disease activity and the extent of the disease.

Methods Twenty seven patients with jSLE and twenty healthy controls were included. Demographic and clinical features of the patients were recorded. Disease activity was assessed using the SLE Disease Activity Index (SLEDAI). The serum levels of sCXCL16 were determined by Eliza and correlated with clinical and laboratory parameters and with SLEDAI. Renal biopsy was done to all patients.

Results The serum levels of sCXCL16 in jSLE patients were higher than controls (p<0.001), they were also significantly higher in patients with alopecia or malar rash than other jSLE. Positive correlation was identified between serum levels of sCXCL16 and SLEDAI score. There was a significant positive correlation between sCXCL16 levels and severity of lupus nephritis as assessed by renal biopsy. Serum levels of sCXCL16 were positively significantly correlated with the 24 hour urine protein, ANA, SBP, DBP AND ESR  1st hour. Serum sCXCL16 level was significantly negatively correlated with C3 serum level.

Conclusions Soluble CXCL16 could become a useful serological marker of disease activity and severity of renal involvement in jSLE patients.

134 AN UNUSUAL CASE OF PAEDIATRIC LUPUS WITH ISOLATED RETINAL INVOLVEMENT

1A Jindal*, 2V Gupta, 3S Suri, 4A Rawat, 1A Gupta, 5S Singh. 1PGIMER, Paediatrics, Chandigarh, India; 2PGIMER, Ophthalmology, Chandigarh, India

Background and Aims Eye involvement in SLE is seen in around one third of patients. Retinal involvement is an uncommon but potentially vision threatening complication.

Methods To report the case of a young boy with isolated retinal involvement as the only manifestation of lupus.

Results A 9 year old previously healthy boy presented with complaints of fever, vomiting, seizures and alteration of sensorium. He had signs of raised intracranial pressure and rest of the examination was unremarkable (Investigations in Table 1 and 2). He was managed as a case of viral meningo-encephalitis though his CSF examination and neuroimaging revealed no abnormality. He was incidentally detected to have cotton wool spots in both eyes. After recovering from acute illness, he was also noted to have low vision in both eyes (light perception at 3 feet) Subsequently, a fundus fluorescein angiography was performed.