records. Mortality data were derived by linking with data from the Korean National Statistics Office (KNSO). Multivariable logistic regression and cox regression test were performed to assess the risk factor of NPSLE and predictors of mortality.
Results Of 1121 SLE patients, 429 (38.2%) patients had NPSLE events according to ACR definitions and 216 (19.3%) by Ainiala criteria. In multivariable logistic regression analysis, year of education [Odds ratio (OR) 0.92, 95% confidence interval (CI) 0.87 to 0.96, p<0.01] and elevated anti-dsDNA antibodies (OR 0.52, CI: 0.37 to 0.76, p<0.01) decreased the risk of NPSLE. In multivariable cox regression analysis, SLEDAI without NP manifestations at enrollment increased the risk of mortality (OR 1.18, CI: 1.08 to 1.25, p<0.01) in NPSLE patients.
Conclusion The 38.2% and 19.3% of SLE patients had NPSLE according to ACR and Ainiala definition of NPSLE. Year of education and elevated anti-dsDNA antibodies decreased the risk of occurrence of NPSLE. SLEDAI without NP manifestations at enrollment increased the risk of mortality in NPSLE patients.

PS3:54 CHARACTERISTIC FEATURES OF HAEMATOLOGICAL INVOLVEMENT AND ITS EFFECT ON DAMAGE ACCRUAL IN PATIENTS WITH SYSTEMIC LUPUS ERYTHEMATOUSUS: PRELIMINARY RESULTS FROM A MULTICENTER EUROPEAN COHORT

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Background and aim We studied haematological manifestations (HM) and their impact on the progression of damage in systemic lupus erythematosus (SLE) using a multicenter European cohort of patients.
Methods We examined the observational data of a SLE patients with serial clinical and laboratory measurements of every 6 months for 2 years gathered from 4 different countries. Each collaborative centre was asked for a contribution of fifty or more consecutive SLE patients. We compared clinical features, antibody profiles, SLEDAI-2K and SDI in patients with and without HM using Chi-Square and Student's t-tests for categorical and continuous variables, respectively. Multivariate Cox Proportional hazards regression was used the investigate the quartiles of leukocytes, lymphocytes and platelets at every time point (at 0,6,12,18,24 months) in relation to the damage characterised by the SDI scores. Probability of change in damage index (from SDI=0 to SDI equal or greater than 1) was calculated using mixed models logistic regression. Adjustments ma Results are presented as odds ratios (ORs) with their 95% CIs; results were defined significant as a p 0.05.
Results So far, 751 measurements of 159 patients were examined. Mean age was 44.9 (13.5) vs 44.0 (12.9) for patients with and without HM, respectively (p=NS). Mean disease duration at the time of cohort created was 11.1 (6.2) vs 10.8 (4.9) in patients with or without HM. Demographic features, clinical characteristics of patients with HM at SLE diagnosis or during the follow up are demonstrated in table 1. Sex, ethnicity and baseline autoantibodies showed no influence on damage. SLEDAI-2K was associated with an increased OR of 2.1 [95% CI: 1.29 to 3.42] for damage.
Conclusion Preliminary results imply that disease activity predicts future damage accrual in patients with haematological manifestations.

Abstract PS3:54 Table 1

Characteristics	Median (range) unless stated otherwise
Gender: female, n (%)	101 (88)
Ethnicity, n(%)	
Caucasian	109(94)
African	6(6)
SDI first recorded, n(%)	
0	90(78)
1	18(16)
≥2	7(6)
HM first detected	
Disease onset	78(68)
Disease course	37(32)
Leukopenia ≤3000	27(23)
Lymphopenia ≤1000	71(62)
Thrombocytopenia	39(34)
AHA	20(17)
Associated clinical features	
Musculoskeletal	75(65)
Cutaneous	57(50)
Renal	33(29)
Neurological	12(10)
Associated Abs	
Anti-dsDNA	60(53)
Anti-Ro	31(27)
Anti-Sm	18(16)

PS3:55 PREDICTIVE POTENTIAL OF THE DISEASE ACTIVITY INDEX AND C-REACTIVE PROTEIN FOR INFECTION IN SYSTEMIC LUPUS ERYTHEMATOSUS PATIENTS

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Aim of the work The aim of the present work was to determine the prevalence of infections in a cohort of Egyptian Systemic lupus erythematosus (SLE) patients and to describe their