with the presence of a cardiovascular risk factor (p=0.04) while CD was associated with anxiety and depression in at risk individuals (p=0.047). A relationship between CD and level of education, gender and current work was also observed.

Conclusions In this exploratory study we identified an association between conventional cardiovascular risk factors and cognitive dysfunction. However there was no association between any of the immune parameters and MoCA score. Prevention of cognitive dysfunction in SLE should focus on early identification and treatment of cardiovascular risk.

Funding Source(s): None

REFERENCES