Abstract P146 Table 1 Characteristics of the population studied and comparison between patients with and without fragility fractures

	Total	Without fracture	With fracture	P
Total, N	250	222	28	
Females, N (%)	229 (92)	203 (91)	26 (93)	0.574
Ethnicity				
Caucasian, N (%)	130 (52)	114 (52)	16 (57)	0.569
Afro-Caribbean, N (%)	62 (25)	56 (25)	6 (21)	
Asian, N (%)	45 (18)	39 (18)	6 (21)	
Other, N (%)	12 (5)	12 (5)	0 (0)	
Age SLE diagnosis(y), median (IQR)	27 (20)	27 (18)	36 (16)	0.009
DEXA osteoporosis, N (%)	40 (16)	30 (14)	10 (36)	0.006
Age at 1st fracture(y), mean $\pm$ SD	N/A	N/A	51 $\pm$ 16	N/A
Ever treatment with steroids, N (%)	235 (94)	209 (94)	26 (93)	0.519
Average daily dose PDN(mg), median (IQR)	6.20 (3.13)	6.23 (3.16)	5.36 (3.40)	0.127
Cumulative dose PDN(g), median (IQR)	21.68 (22.03)	20.96 (21.08)	25.19 (20.43)	0.229
Body mass index, median (IQR)	24 (6)	24 (6)	23 (6)	0.440
Smokers, N (%)	34 (27)	29 (26)	5 (33)	0.385
Vitamin D deficiency, N (%)	27 (11)	22 (10)	5 (18)	0.167
Vitamin D supplement, N (%)	232 (93)	204 (92)	28 (100)	0.109
Calcium supplement, N (%)	212 (85)	186 (84)	26 (93)	0.163
Hyperparathyroidism, N (%)	6 (2)	3 (1)	3 (11)	0.020
ESRD, N (%)	8 (3)	8 (4)	0 (0)	0.381
Hyperthyroidism, N (%)	3 (1)	3 (1)	0 (0)	0.699
Gonadal failure, N (%)	4 (2)	2 (1)	2 (7)	0.063
Rheumatoid arthritis, N (%)	12 (5)	9 (4)	3 (11)	0.139
Anti-osteoporotic treatment				
Bisphosphonates, N (%)	82 (33)	60 (27)	22 (79)	<0.001
Denosumab, N (%)	3 (1)	1 (0.5)	2 (7)	0.034
Teriparatide, N (%)	2 (1)	0 (0)	2 (7)	0.012
Strontium ranelate, N (%)	2 (1)	0 (0)	2 (7)	0.012
Raloxifen, N (%)	2 (1)	1 (0.5)	1 (4)	0.212
Hormonal replacement therapy, N (%)	4 (2)	3 (1)	1 (4)	0.380

SLE: Systemic lupus erythematosus; PDN: prednisolone; ESRD: End-stage renal disease

P147 NEUROPSYCHIATRIC MANIFESTATIONS AND MENTAL DISORDERS, A COMPLEX SPECTRUM OF HETEROGENEOUS DISEASE: A DESCRIPTIVE COHORT STUDY

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Background Neuropsychiatric manifestations in patients with systemic lupus erythematosus (SLE), termed neuropsychiatric SLE (NPSLE), involve a wide variety of neurological and psychiatric manifestations with a complex approach. The aim of this study was to determine the prevalence of mental disorders and neuropsychiatric involvement in a group of patients with SLE and to examine the relationship with other clinical manifestations.

Methods A single center, retrospective, case control study was including patients 18 years and older diagnosed with SLE in a tertiary hospital. Clinical and demographical variables were collected. NPSLE was defined by classification criteria, and others minor nonspecific NPSLE manifestations (depression, anxiety, dizziness) were collected. Statistical analysis was carried out using R software.

Results From a total of 66 patients 24.2% (16 patients) had at least one mental disorder or neuropsychiatric manifestation. The most frequently reported was depression (n=7, 43.8%), dizziness (n=5; 31.2%); headache (n=4; 25%); insomnia (n=2; 12.5%) and cognitive impairment (n=2; 12.5%). Brain MRI nonspecific findings were reported in 2 patients (12.5%). ANA was positive in all cases. The prevalence of anti-Rib-P was very low, only present in one patient (1.5%). 8 patients (12.1%) had secondary antiphospholipid syndrome (APS). Associations with APS, other manifestations or corticosteroid use were not statistically significant.

Conclusions There is a low prevalence of severe neuropsychiatric syndromes in our cohort. Almost 1/4 of our cohort had

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at least one mental disorder or neuropsychiatric manifestation, the most frequently reported was depression.

P148 A STUDY OF DISEASE PROFILE OF ADULT AND JUVENILE LUPUS PATIENTS AT DISEASE ONSET AT TERTIARY CARE CENTRE OF NORTHERN INDIA

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Background Systemic Lupus Erythematosus (SLE) is a chronic autoimmune disease. It may affect adults and paediatric patients and may have different organ involvement at onset of disease.

Objectives To study disease profile of 100 adult and paediatric SLE patients at disease onset to find any significant difference in organ involvement in both cohorts.

Abstract P148 Table 1

NO.	Data at onset	Adult SLE patients N – 100	Paediatric SLE patients N-100	P value
1	Male/Female	15/85	24/76	0.15
2	Median Age at onset	34 (9 – 71)	9.5 (3.4 – 17.4)	-
3	Median Age at diagnosis	35 (9 – 71)	10.25 (3.5 – 19.0)	-
4	Median delay	1 (0–15)	0.75 (0 – 5.33)	-
5	Acute cutaneous lupus	67	55	0.11
6	Chronic cutaneous lupus	07	05	0.77
7	Mouth ulcer	46	55	0.26
8	Alopecia	63	57	0.47
9	Arthritis	47	65	0.015*
10	Serositis	23	13	0.097
11	Pleural effusion	20	11	0.12
12	Pericardial effusion	09	3	0.13
13	Ascites	05	2	0.44
14	Lupus nephritis	26	36	0.17
15	NPSLE	13	24	0.068
16	Leukopenia	07	25	0.0008*
17	Thrombocytopenia	32	21	0.11
18	ANA positivity	100	99	1.0
19	Anti-dsDNA positivity by IF	47	77	0.0001*
20	Anti-SM	24	13	0.068
21	Anti-cardiolipin antibody	09	21	0.028*
22	LAC	09	22	0.018*
23	ANTI-B2GP1	05	01	0.21
24	C3 LOW	41	82	0.0001*
25	C4 LOW	35	83	0.0001*
26	DAT positivity	31	33	0.88
27	Fever	57	82	0.0002*
28	Fatigue	88	57	0.0001*
29	Weight loss	47	33	0.06
30	RP	39	09	0.0001*
31	Myalgia	42	52	0.20
32	Vasculitic rash	04	29	0.0001*
33	lymphadenopathy	27	48	0.0034*
34	SLEDAI (mean)	12.9	16.59	-
35	Thrombosis	18	01	0.0001*

* - statistically significant

Method 100 adult and 100 paediatric patients who classified SLE-SLICC criteria were recruited in study after taking consent at tertiary care centre in northern India. Demographic data and clinical profiles were recorded. Fisher's test was used to find p value and p value less than 0.05 was taken as statistical significance.

Results Out of 100 patients, females were 85% in adult cohort Vs 76% in paediatric cohort. Median delay in diagnosis was more with adult than paediatric cases. Lupus nephritis, mouth ulcers, NPSLE was common in paediatric SLE patients. In adult cohort, there was significant association for fatigue, RP, and thrombosis.

Conclusion Major organ involvement was frequent in adult patients while arthritis, leukopenia, low complements, more positivity of anti-dsDNA, APLA antibodies positivity were significantly common in paediatric cases.

P149 ASSOCIATION BETWEEN GEOGRAPHIC AND CLIMATOLOGICAL CONDITIONS AND CUTANEOUS MANIFESTATIONS IN LUPUS PATIENTS FROM THE SPANISH RHEUMATOLOGY SOCIETY LUPUS REGISTRY COHORT

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Background/Purpose Ultraviolet radiations act by modifying DNA in sun-exposed skin of lupus patients. We develop a study to analyze the association between climatological conditions and cutaneous manifestations in systemic lupus erythematosus (SLE).

Methods Patients data from Spanish Rheumatology Society Lupus Registry (RELESSER) cohort were retrospectively analyzed for presence of cutaneous lesions (alopecia, photosensitivity, malar rash, discoid lesions, oral ulcers and subacute lesions). We included patients who were assessed in rheumatology services from January 2011 to December 2012. Data of climatological conditions throughout the Spanish geography were provided by the Spanish Meteorological Agency.

Results A total of 2919 patients were included, 87.3% female. Others biological and clinical data are showed in table 1. In the multivariable model, positive associations were observed between coastal regions OR 1.470 (95% CI:1.080–2.001 p=0.014), anti-DNA OR 1.806 (95% CI:1.276–2.556, p=0.001), antiphospholipids antibodies OR 1.428 (95% CI:1.093–1.864 p=0.009), serositis OR 1.557 (95% CI:1.181–2.053 p=0.002) and arthritis OR 1.804 (95% CI:1.258–2.587 p=0.001). Negative associations were observed between females OR 0.412 (95% CI:0.284–0.599, p=0.000) and anti-malarial drugs OR 0.469 (95% CI:0.327–0.671, p=0.000).

Conclusion Although the influence of global and ultraviolet radiations on the development of cutaneous lesions in SLE