

Abstract P149 Table 1 Geographical, climatological, biologic and clinical patients characteristics

	No cutaneous manifestations	Cutaneous manifestations	p
Age, year \pm SD	49.3 \pm 15.9	46.2 \pm 13.9	0,000
Disease duration (last visit to onset SLE), median (interquartile range), months	95.5 (48.2–151.5)	133.0 (70.8–213.2)	0,921
Global radiation, mean daily radiation \pm SD	1620.0 \pm 175.1	1620.9 \pm 193.9	0.902
Ultraviolet radiations, mean daily radiation \pm SD	2416.7 \pm 449.9	2446.6 \pm 481.4	0.202
Hours of Sun, year mean \pm SD	2144.9 \pm 290.9	2149.4 \pm 328.8	0.757
Temperature, mean monthly \pm SD	15.2 \pm 3.5	15.3 \pm 3.6	0.629
Humidity, relative mean \pm SD	2416.7 \pm 449.9	2416.7 \pm 449.9	0.138
	N=495	N=2424	p
Sex: female, n (%)	405 (81.8)	2251 (92.8)	0.000
Current smoking: n (%)	61 (12.3)	383 (15.8)	0.062
South area, n (%)	376 (75.9)	1746 (72.0)	0.065
Coastal regions, n (%)	277 (55.9)	1231 (50.7)	0.033
Caucasian, n (%)	437 (88.2)	2198 (90.6)	0.118
Latinoamerican, n (%)	31 (6.2)	118 (4.8)	0.189
Arthritis, n (%)	402 (81.2)	1862 (76.8)	0,018
Serositis, n (%)	178 (35.9)	609 (25.1)	0,000
Renal disorder, ever, n (%)	139 (28.0)	689 (28.4)	0.861
Retina disorder, ever, n (%)	12 (2.4)	121 (5.0)	0.540
Hemolytic anemia, n (%)	26 (5.2)	103 (4.2)	0,371
Leucopenia, n (%)	272 (54.9)	1466 (60.4)	0.010
Lymphopenia, n (%)	279 (56.3)	1252 (51.6)	0.051
Thrombocytopenia, n (%)	101 (20.4)	524 (21.6)	0.508
Antiphospholipids antibodies, n (%)	217 (43.8)	875 (36.1)	0.001
Anti DNA, n (%)	401 (81.0)	1704 (70.2)	0.000
Anti Sm, n (%)	102 (20.6)	513 (21.1)	0.728
Anti-Ro/SSA, n (%)	158 (31.9)	982 (40.5)	0.000
Anti-La/SSB, n (%)	71 (14.3)	501 (20.6)	0.001
Hypocomplementemia, n (%)	362 (73.1)	1867 (77.0)	0.072
SELENA-SLEDAI, median (interquartile range)	2 (0–3)	2 (0–4)	0.990
SLICC/ACR-DI, median (interquartile range)	0 (0–1)	1 (0–1)	0.252
Katz severity index, median (interquartile range)	2 (1–3)	2 (1–3)	0.900
Glucocorticoids, ever, n (%)	403 (81.4)	2046 (84.4)	0.474
Antimalarial drug: ever, n (%)	371 (74.9)	2036 (84.0)	0.000

have been suggested, the results of our study does not support an association between the diverse climatological conditions and cutaneous manifestations in SLE. However we observed an independent association with living in coastal areas.

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THE EVOLVING CLINICAL PRESENTATION OF SYSTEMIC LUPUS ERYTHEMATOSUS IN A NEWLY ESTABLISHED CAUCASIAN COHORT: LOW INCIDENCE OF LUPUS NEPHRITIS AND HIGH BURDEN OF NEUROPSYCHIATRIC DISEASE

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Background We sought to analyze the phenotype of the disease at the time of presentation and at last follow-up, in a newly established SLE cohort in Attica based at 'Attikon' University Hospital which combines primary, secondary and tertiary care for the region.

Methods In this retrospective study, 555 Caucasian patients were included diagnosed with SLE according to ACR 1997 criteria and/or the SLICC 20112 criteria. Demographic data, clinical course, serology, treatments, severity pattern and SLICC damage index (SDI) were recorded for each patient at the time of diagnosis and at last evaluation.

Results Mean (SD) age at lupus diagnosis was 38.3 years (\pm 15.6) with median (IQR) disease duration at last follow-up 2 (10) years. Irreversible damage accrual was prevalent in 17.8% of lupus individuals at diagnosis, involving mainly thrombotic and neuropsychiatric events. At initial presentation, most common criteria manifestations were arthritis (73.3%), acute cutaneous lupus (65%) and leukopenia (23.8%), while among symptoms not included in any criteria set, Raynaud's phenomenon (33%) and unexplained fever (25%) were most prevalent. Renal and neuropsychiatric involvement as presenting manifestations were present at 10.3% and 11.5%, respectively. Clinical characteristics at the time of diagnosis and cumulatively, are summarized in table 1. At the time of diagnosis, 6.3% of patients were ANA negative, whereas only one third had positive anti-dsDNA. At last evaluation, 202 patients (36.4%) had severe lupus and more than half patients were treated with pulses of cyclophosphamide.

Abstract P150 Table 1 Clinical manifestations at diagnosis and cumulatively. (N=555)

Clinical items	At diagnosis	Cumulatively
Arthritis, n(%)	407(73.3)	473(85.2)
Acute cutaneous lupus, n(%)	361 (65.0)	393 (70.8)
Malar Rash, n(%)	221 (39.8)	250 (45.0)
Photosensitivity, n(%)	282 (50.8)	297 (53.5)
Chronic cutaneous lupus, n (%)	55 (9.9)	62 (11.2)
Oral/Nasal ulcers, n(%)	98 (17.7)	143 (25.8)
Non-scarring alopecia, n(%)	124 (22.3)	175 (31.5)
Lupus Nephritis, n(%)	57 (10.3)	118(21.3)
Primary NPSLE, n(%)	64 (11.5)	98 (17.6)
Serositis, n(%)	64 (11.5)	104 (18.7)
Leukopenia, n(%)	132 (23.8)	196 (35.3)
AIHA, n(%)	15 (2.7)	19 (3.4)
Thrombocytopenia, n(%)	68 (12.3)	88 (15.9)
Raynaud's, n(%)	183 (33.0)	205 (37.0)
Fever, n(%)	138 (25.0)	171 (31.0)
Livedo reticularis, n(%)	38 (6.8)	57 (10.2)
Lymphadenopathy, n(%)	37 (6.7)	51 (9.2)

Conclusions In this cohort of Caucasian patients, lupus nephritis is not as common as indicated in older literature, while neuropsychiatric disease is an emerging frontier in lupus prevention and care. These data may have implications for early recognition and diagnosis of SLE.