

## REFERENCES

1. Lockshin MD, et al. *Arthritis Rheum.* 2012; **64**:2311–8.
2. Miyakis S, et al. *J Thromb Haemost.* 2006; **4** :295–306.
3. Andreoli L, et al. *Ann Rheum Dis.* 2017; **76**: 476–85.

P80

### SEXUAL HEALTH IN SYSTEMIC LUPUS ERYTHEMATOSUS: A CROSS-SECTIONAL ANALYSIS

<sup>1,2</sup>Agna Neto, <sup>1,2</sup>Rita Torres, <sup>1,2</sup>Carina Lopes, <sup>1,2</sup>Filipa Mourão, <sup>1,2</sup>Jaime Branco, <sup>1</sup>Manuela Costa. <sup>1</sup>Rheumatology Dept., Hospital de Egas Moniz, Centro Hospitalar de Lisboa Ocidental, Lisbon; <sup>2</sup>CEDOC, Lisbon, Portugal

10.1136/lupus-2020-eurolupus.125

**Background/Purpose** Systemic Lupus Erythematosus (SLE) can affect different aspects of patients' life, including sexuality. Sexual dysfunction is an under-recognized multifaceted issue that may be caused by pain during intercourse, joint stiffness, functional limitations, fatigue or depression. This study aims to evaluate sexuality in SLE and to identify potential risk factors for sexual dissatisfaction.

**Methods** This is a cross-sectional observational study, which included patients diagnosed with SLE, aged between 18 and 65 years old. An anonymous patient-reported questionnaire was designed consisting of three domains: socio-demographic characteristics, disease characteristics and sexuality. The questionnaire was sent to all members of a national association of SLE patients. Mann-Whitney U test, Fisher's exact test or chi-square test were used to compare differences between groups, as appropriate.

**Results** A total of 215 patients were included, of which 84% were female. Mean age was  $38.2 \pm 10.4$  years and mean disease duration was  $13.2 \pm 7.8$  years. Nearly 82% were sexually active and had a mean frequency of sexual activities of  $5.5 \pm 2.5$  per month. Among sexually active patients, 33% were sexually dissatisfied. There was no significant association between sexual satisfaction and age, gender, marital status, educational level, work status, use of walking aids,

joint prosthesis or therapies used (table 1). Sexually dissatisfied patients had shorter disease duration ( $12.1 \pm 6.2$  vs  $14.8 \pm 9.1$  years,  $p=0.036$ ) and lower rates of remission (26.4% vs 45.8%) than those who were fully satisfied. The lower the disease activity, the higher the sexual satisfaction. Among sexually dissatisfied patients, 85% pointed out that SLE had a negative impact on their sexual health, while only 28% of sexually satisfied patients reported the same ( $p<0.001$ ).

**Conclusion** Sexual dissatisfaction in patients with SLE is significantly associated with shorter disease duration and higher disease activity. Sexual health plays an essential role in these patients' quality of life and its assessment should be part of routine clinical care.

P81

### 15 YEARS EXPERIENCE IN FOLLOW-UP OF PREGNANCY OF AUTOIMMUNE DISEASES IN A MULTIDISCIPLINARY UNIT

<sup>1</sup>Esther Ruiz-Lucea, <sup>1</sup>Oihane Ibarquengoitia, <sup>1</sup>Natalia Rivera, <sup>3</sup>Jenaro Oraa, <sup>1</sup>Eduardo Úcar, <sup>1</sup>Ana Intxaurre, <sup>1</sup>Itziar Calvo, <sup>1</sup>David Montero, <sup>1</sup>Lucía Vega, <sup>1</sup>Carmen García, <sup>1</sup>Clara Perez, <sup>1</sup>Olaia Fernández, <sup>1</sup>Ignacio Torre, <sup>1</sup>Juan Blanco, <sup>1</sup>Eva Galindez, <sup>1</sup>MJ Allande, <sup>2</sup>Iñigo Gorostiza, <sup>1</sup>Eduardo Cuende, <sup>1</sup>Maria Luz García. <sup>1</sup>Rheumatology Dept., Basurto University Hospital, Bilbao; <sup>2</sup>Research Unit, Basurto University Hospital, Bilbao; <sup>3</sup>Obstetric Dept., Basurto University Hospital, Bilbao, Spain

10.1136/lupus-2020-eurolupus.126

**Background** Women with autoimmune diseases have high-risk pregnancies. Close and multidisciplinary control is recommended.

**Objective** To describe the experience in a multidisciplinary unit (Rheumatologists and Obstetrics), assess complications and treatments in the evolution of pregnancies in patients with autoimmune diseases in a tertiary hospital.

**Material and Methods** Retrospective study of pregnancy outcomes in patients with autoimmune diseases and follow-up in a multidisciplinary unit between January 2003-December 2018. Demographics, maternal disease, previous abortions, autoantibodies (AAb), births and abortions during follow-up, treatment and maternal and fetal complications were collected. Data analysed using SPSS v23.

**Results** 109 patients (151 pregnancies). Maternal age at diagnosis: 34,9 years; age at abortion/childbirth 38,6 years. 50 abortions registered prior to follow-up in our unit (0.45 abortions/mother). During follow-up 19 abortions were registered (0.17 abortions/mother) (table 1). Abortions were more frequent among women with positive antiphospholipid antibodies (aPL) (14.3% vs 4.3%) ( $p = 0,013$ ). Anti-Ro carriers (36.6%) didn't have higher frequency of abortions ( $p = 0,798$ ); one case of heart block was recorded.

13.5% pre-term (<37 weeks) pregnancies; caesarean section (C-section) performed in 26% (17,3% in SLE). Intrauterine growth restriction (IUGR) observed in 6 (3,9%); pre-eclampsia in 4 (2,6%): SLE (n:3 and n:2 respectively), APS (n:1 and

**Abstract P80 Table 1** Comparison of sociodemographic and clinical characteristics, between sexually satisfied and dissatisfied patients

	Sexual satisfaction	Sexual dissatisfaction	p-value
Age, years	39.1 ± 8.9	37.8 ± 9.3	0.179
Disease duration, years	14.8 ± 9.1	12.1 ± 6.2	0.036
Female gender, %	82.6%	85.2%	0.824
<b>Educational level</b>			
Primary	43.1%	48.1%	0.726
Secondary school	31.2%	25.9%	
High school	25.7%	25.9%	
<b>Marital status</b>			
Single	20.2%	11.1%	0.324
Married	75.2%	85.2%	
Divorced or widowed	4.6%	3.7%	
<b>Work status</b>			
Employed	89.6%	86.3%	0.776
Unemployed	3.8%	3.9%	
Retired	6.6%	9.8%	
<b>Disease activity</b>			
Remission	45.8%	26.4%	0.018
Low	35.5%	37.7%	
Moderate	15.9%	28.3%	
High	2.8%	7.5%	
<b>Use of walking aids</b>	0%	0.9%	0.999
<b>History of knee or hip arthroplasty</b>	0.9%	5.7%	0.105
<b>Current therapies</b>			
NSAIDs	11%	20.4%	0.086
Prednisolone	68.8%	74.1%	0.487
Hydroxychloroquine	38.5%	46.3%	0.343
Immunosuppressive drugs	19.3%	25.9%	0.219
<b>Cyclophosphamide (current or previous use)</b>	13%	13.8%	0.888
<b>Negative impact of SLE on sexuality</b>	28.4%	84.6%	<0.001

**Abstract P81 Table 1**

MATERNAL DISEASE	n (%)	n abortions	n births
Systemic Lupus Erythematosus (SLE)	80 (52,9%)	5	75
Asymptomatic women with positive autoantibodies	52 (34,4%)	2	50
Antiphospholipid syndrome (APS)	19 (12,5%)	4	15