Abstract 118 Figure 2 Infographic - The PA seesaw for PwSLE. The individual with SLE is on the seesaw between being inactive and active. The themes at the inactive side may be hurdles to PA and the themes on the active side may be aids to PA. For an individual, each theme may have a more negative or positive impact on PA, moving from left to right. The importance of each theme may also vary, growing or shrinking in size, depending on the individuals circumstances. Clinicians should consider the importance and relevance of each of the themes to ensure development of tailored PA interventions for PwSLE

P119 MEDICATION ADHERENCE IS INFLUENCED BY RESILIENCE IN PATIENTS WITH SYSTEMIC LUPUS ERYTHEMATOSUS

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Background/Purpose Resilience has received attention as an important process in the experience and management of chronic morbidities.¹ However, few studies have evaluated resilience in patients with systemic lupus erythematosus and possible associations with treatment adherence.² Therefore, the aim of this study was to assess the impact of resilience, the ability to withstand and bounce back from adversity, on medication adherence in SLE patients.

Methods A cross-sectional observational study was conducted in outpatients with SLE. Patients were assessed for resilience (Connor-Davison Resilience Scale, CD-RISC), depressive symptoms (Center for Epidemiologic Studies Depression Scale, CES-D) and medication adherence using the Compliance Questionnaire for Rheumatology (CQR). The disease activity index (Mex-SLEDAI) and damage index (SLICC) were administered in the patients. Factors independently associated with adherence were identified using multivariable logistic regression.

Results Of the 157 patients, 152 (96.8%) were female with a median age of 45.9 (IQR: 39.0–55.5) years and disease duration of 14 (IQR: 10.0–19.0) years. Medication adherence (CQR $\geq 80\%$) and depressive symptoms were found in 74.5% and 43.9% of patients, respectively. Adherent patients had a

lower CES-D score and a higher CD-RISC score. A positive correlation between resilience and adherence was found ($r=0.26$, $p=0.001$). In the multivariate analysis adjusting for demographic and clinical confounders, resilience remained significantly associated with high adherence (OR 1.04 [95% CI 1.02–1.07]). In addition, being older was also independently associated with high adherence (95%CI 1.04 [1.0–1.07]).

Conclusions In SLE patients, resilience may be associated with better medication adherence. Therefore, a resilience-based perspective might be a new approach that focuses on enhancing strategies to improve adherence.

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P120 POTENTIAL AND PROGNOSTIC FACTOR FOR BELIMUMAB-FREE REMISSION IN SLE PATIENTS: SINGLE-CENTER RETROSPECTIVE ANALYSIS

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Background B cells are critically involved in the pathogenesis of systemic lupus erythematosus (SLE), and their increased activity is driven in part by increased levels of growth factors, including B-lymphocyte stimulator (BLyS). Belimumab inhibits