

SUPPLEMENTARY FILE

LLDAS is an attainable treat-to-target goal in childhood-onset Systemic Lupus Erythematosus

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SUPPLEMENTARY METHODS

SUPPLEMENTARY TABLES/FIGURES

Supplementary table 1

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Supplementary figure 1

Supplementary Methods**Statistics**

Data were analyzed using IBM-SPSS-25.0. Regression analysis was performed to related individual variables and reaching LLDAS within 6 months. Disease activity indices were based on values present at diagnosis, medication use was based at values at 3 months after diagnosis. Reaching LLDAS within 6 months was defined as the outcome, the pre-determined variables were covariates in the model. All variables, with exception of medication use at 3 months, with an individual effect of $p < 0.1$ were used to build the multivariable model. Variables with an association of $p < 0.05$ were considered to contribute.

Supplementary Table 1. Patient characteristics

N=51 patients with 700 visits			
Gender			
	Male		8 (15.7%)
	Female		43 (84.3%)
Ethnicity			
	White		27 (52.9%)
	Non-White		24 (47.1%)
Age at diagnosis in years, median (range)			
			14.5 (4.6-17.1)
Visit number per patient, median (range)			
			12 (4-43)
Follow up in years, median (range)			
			3.0 (0.5-12.0)
SELENA-SLEDAI at diagnosis, median (range)			
			8 (1-29)
PGA at diagnosis, median (range)			
			2.0 (0.5-3.0)
BILAG-2004 at diagnosis, median (range)			
			10 (3-42)
Number of organ domains involved at diagnosis, median (range)			
			3 (1-6)
SDI score at last visit, median (range)			
			0 (0-1)
BILAG-2004		SELENA-SLEDAI	
Constitutional A/B at diagnosis	21 (41.2%)	Constitutional	15 (29.4%)
Mucocutaneous A/B at diagnosis	24 (47.1%)	Mucocutaneous	39 (76.5%)
Neuropsychiatric A/B at diagnosis	5 (9.8%)	Neuropsychiatric	4 (7.8%)
Musculoskeletal A/B at diagnosis,	15 (29.4%)	Musculoskeletal	21 (41.2%)
Cardiorespiratory A/B at diagnosis	2 (3.9%)	Cardiorespiratory	3 (5.9%)
Gastrointestinal A/B at diagnosis	9 (17.6%)	Gastrointestinal	-
Ophthalmic A/B at diagnosis	3 (5.9%)	Ophthalmologic	3 (5.9%)
Renal A/B at diagnosis	14 (27.5%)	Renal	20 (39.2%)
Haematological A/B at diagnosis	10 (19.6%)	Haematological	47 (92.2%)
		Immunological	20 (39.2%)

SELENA-SLEDAI domains are scored accordingly: Constitutional (Fever), Mucocutaneous (Vasculitis, Rash, Alopecia, Mucosal ulcers), Neuropsychiatric (Psychosis, Seizure, Organic brain syndrome, cranial nerve disorders, lupus headache, CVA), Musculoskeletal (Arthritis, Myositis), Cardiorespiratory Pleurisy, Pericarditis), Renal (Urinary casts, Hematuria, Proteinuria, Pyuria), Haematological (Low complement, Thrombocytopenia, Leukopenia), Immunological (Increased DNA binding), Ophthalmologic (Visual disturbance).

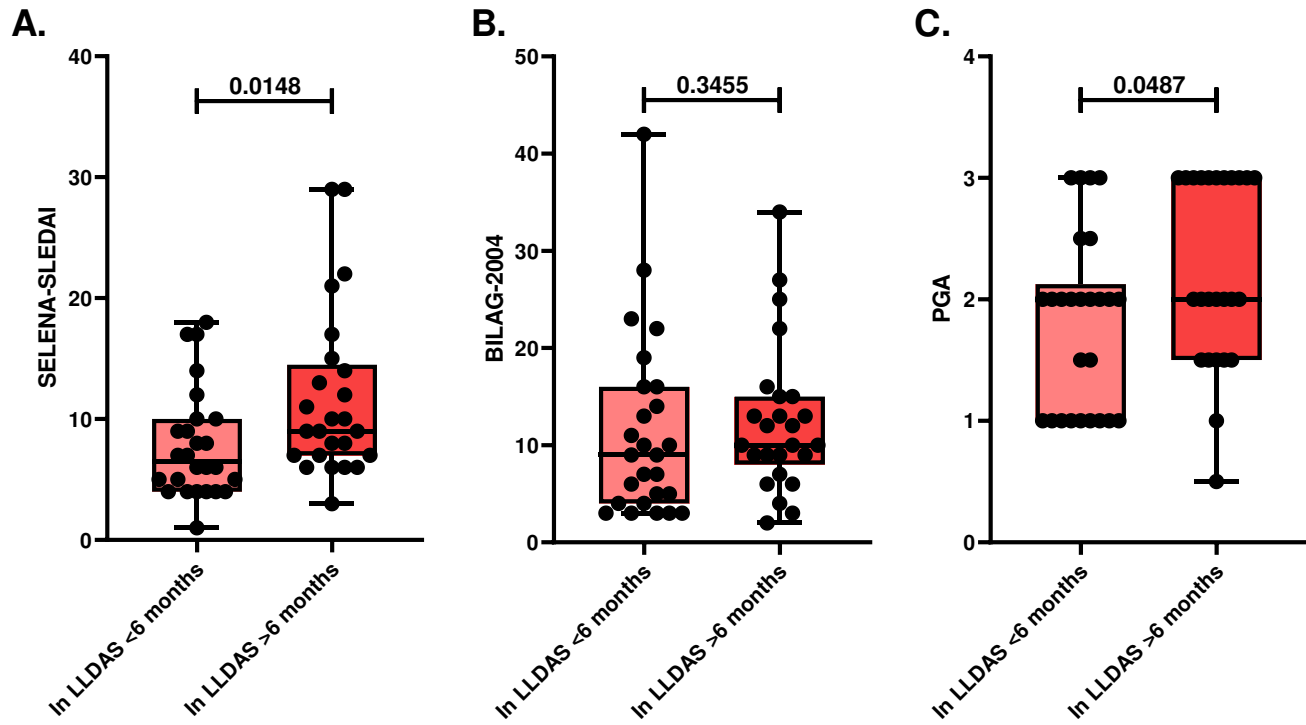
Data is given as number (%) unless specified otherwise. Abbreviations: SDI, SLICC damage index

Supplementary Table 2. Medication use over time

	After Diagnosis (AD)	2 weeks AD	3 months AD	6 months AD	1 year AD	2 years AD	Ever used
Number of patients	51	51	51	51	46	41	51
Hydroxychloroquine	33 (64.7%)	35 (68.6%)	48 (94.1%)	49 (96.1%)	45 (97.8%)	40 (97.6%)	52 (100%)
Mycophenolate Mofetil	13 (25.5%)	15 (29.4%)	24 (47.1%)	29 (56.9%)	28 (60.9%)	25 (61.0%)	32 (62.7%)
Prednisone	29 (56.9%)	29 (56.9%)	31 (60.8%)	29 (56.9%)	14 (30.4%)	9 (22.0%)	37 (72.5%)
Prednisone dose median (mg/kg/day)	0.74 (0.05-1.68)	0.59 (0.05-1.68)	0.44 (0.05-1.46)	0.16 (0.05-1.54)	0.17 (0.04-1.56)	0.14 (0.04-0.87)	
NSAIDs	16 (31.4%)	16 (31.4%)	16 (31.4%)	12 (23.5%)	8 (17.4%)	8 (19.5%)	23 (45.1%)
Methotrexate	3 (5.9%)	3 (5.9%)	3 (5.9%)	4 (7.8%)	3 (6.5%)	2 (4.9%)	5 (9.8%)
Azathioprine	1 (2.0%)	2 (3.9%)	1 (2.0%)	1 (2.0%)	0 (0.0%)	1 (2.4%)	3 (5.9%)
Cyclophosphamide	0 (0.0%)	2 (3.9%)	3 (5.9%)	1 (2.0%)	1 (2.2%)	0 (0.0%)	3 (5.9%)
Rituximab	1 (2.0%)	1 (2.0%)	3 (5.9%)	2 (3.9%)	2 (4.3%)	2 (4.9%)	8 (15.7%)
Belimumab	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (2.2%)	2 (3.9%)

Supplementary Figure 1 Disease activity at diagnosis in patients who achieved LLDAS within or after 6 months.

A). SELENA-SLEDAI B). BILAG-2004 C). PGA



Dots represent individual patients. Mann-Whitney-U test was used to compare the two groups.