

AUTOIMMUNE CONNECTIVE TISSUE DISEASES

CLINICAL MANIFESTATIONS AND IMMUNOLOGICAL FEATURES OF JUVENILE-ONSET AND LATE-ONSET SYSTEMIC LUPUS ERYTHEMATOSUS IN CHINA

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Background: Systemic lupus erythematosus (SLE) is a multisystem autoimmune disease with a broad spectrum of clinical presentation that affects mostly women. SLE patients with different ages, sexes and races will have different clinical manifestations and immunological antibodies.

Objective: To reveal the differences in clinical manifestations and immunological features between systemic lupus erythematosus (SLE) patients with juvenile group and late-onset group.

Methods: The juvenile group and late-onset group were defined by the age of onset before 18 years and after 45 years, respectively. The clinical manifestations and laboratory test results of each patient in the statistical epidemiological questionnaire were analyzed by SPSS, and P-values below 0.05 were considered to be statistically significant.

Results: In this study, we collected 275 patients in the juvenile-onset group and 211 patients in the late-onset group. After analysis by SPSS software, the frequency of six clinical features was significantly higher in juvenile group than in late-onset group, such as malar rash (69.5% vs. 16.9%, $P < 0.001$), photosensitivity (51.3% vs. 35.5%, $P = 0.001$), renal damage (56.0% vs. 43.1%, $P = 0.005$), alopecia (28.4% vs. 19.9%, $P = 0.032$) and low complement C3 (62.2% vs. 53.1%, $P = 0.044$). Conversely, several clinical phenotypes were more likely to occur in the late-onset group, such as serositis (12.3% vs. 6.5% in adolescent, $P = 0.028$) and high level of anti-Ro (SSA, 52.1% vs. 40.4% in the adolescent, $P = 0.01$).

Conclusions: The study suggested that the clinic manifestations and immunological features were different between juvenile group and late-onset group. Notably, early detecting of renal damage in the juvenile group and treating of serositis in the late-onset group may contribute to the prognosis of patients with SLE.