Abstract Group: 1.5. Diffuse Parenchymal Lung Disease

Keyword 1: Interstitial lung disease (connective tissue disease)  Keyword 2: Chronic disease  Keyword 3: Lung injury

Title: Pulmonary involvement in Moldova lupus study

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Body: The aim: To investigate the pattern and the predictive factors of pulmonary involvement in Systemic Lupus Erythematosus (SLE) in Republic of Moldova. Methods: All subjects fulfilled the SLICC 2009 classification criteria for SLE. Socioeconomic, demographic, clinical, immunological, treatment aspects of SLE were evaluated. Activity was assessed by SLEDAI, Damage Index – by SLICC. Results: The study included 90 patients, mean age 37,8±12,1 years, female rate 88,9%, disease duration - 118,7±18,3 months. The study group was divided: group I - patients with pulmonary manifestations – 37 (41,1%), and group II - without them – 53 (58,9%) patients. The pattern of pulmonary involvement was represented by pleuritis in 23 (25,6%), pulmonary interstitial nonspecific fibrosis (PINS) in 5 (5,6%), isolated pulmonary hypertension in 3 (3,3%), pulmonary embolism 2 (2,2%) and association of more than two in 4 (4,4%) patients. Pulmonary involvement occurred after mean disease duration of 18 months with pleuritis, other involvements were observed later in the course of the disease. The pulmonary lesions were directly correlated with Raynaud syndrome, pulmonary embolism - with antiphospholipidic antibodies. The pulmonary manifestations were associated with joint involvement and were independent to renal involvement. The activity of SLE by SLEDAI more than 16 points at the time of diagnosis was predictive for pulmonary damage at 52,2±0,52 months. Cutaneous manifestations are supposed to be a protective factor for lupus lung disease. Conclusion: Pulmonary involvement in SLE patients in MOldova LUpus Study was 41,1% cases. Predictor factors for early respiratory involvement were high activity of lupus, Raynaud and antiphospholipid syndromes.