# REUMA.PT/LES: THE EXPERIENCE OF TWO CENTRAL HOSPITALS IN LISBON



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### Introduction

Reuma.pt, the Rheumatic Diseases Register from the Portuguese Society of Rheumatology has recently expanded its coverage to Systemic Lupus Erythematous (SLE) patients, the Reuma.pt/LES.

Reuma.pt/LES is a web-based platform launched in September 2012 that simultaneously serves as a nationwide longitudinal registry and as an electronic medical record.

Its aim is to prospectively collect clinical and laboratory data, in a standard way, from a large number of SLE patients in order to increase the knowledge of the disease, while improving the quality of clinical care.

# Objectives and Methods

- o To present the structure and functioning of the application Reuma.pt / LES
- To describe SLE patients from two participating centers of the Lisbon area -Hospital Garcia de Orta (HGO) and Hospital Santa Maria (HSM) – followed in the Reuma.pt/LES
- Patients fulfilling ACR classification criteria for SLE and registered until 31<sup>th</sup>
   January 2013 were included in the analysis

## Results

#### The Portuguese registry of lupus patients - Reuma.pt/LES

	Nº of participating centers	Nº of patients registered	Nº of visits
<b>June 2013</b>	48	1440	2148

#### Reuma.pt/LES description

- Access protected by username and password;
- o **First menu**: create a new patient, new visit, edit previous visits and choose different protocols; (Figure 1)
- Common screens across all databases: identification, demographic data, work status, life styles, body mass index, previous medical history, co-morbidities, laboratorial results form, past and current therapies, adverse events, tuberculosis screening, observations/notes;
- SLE specific screens: ACR and SLICC 2012 classification criteria, thrombotic and obstetric manifestations, SLE disease activity at each visit, fatigue scale, health related quality of life measures, irreversible damage; (Figure 2)
- Summary data report: After data collection, Reuma.pt can generate a preformatted report, integrating all information and also an evolutionary framework; (Figure 3)
- All screens are printable.

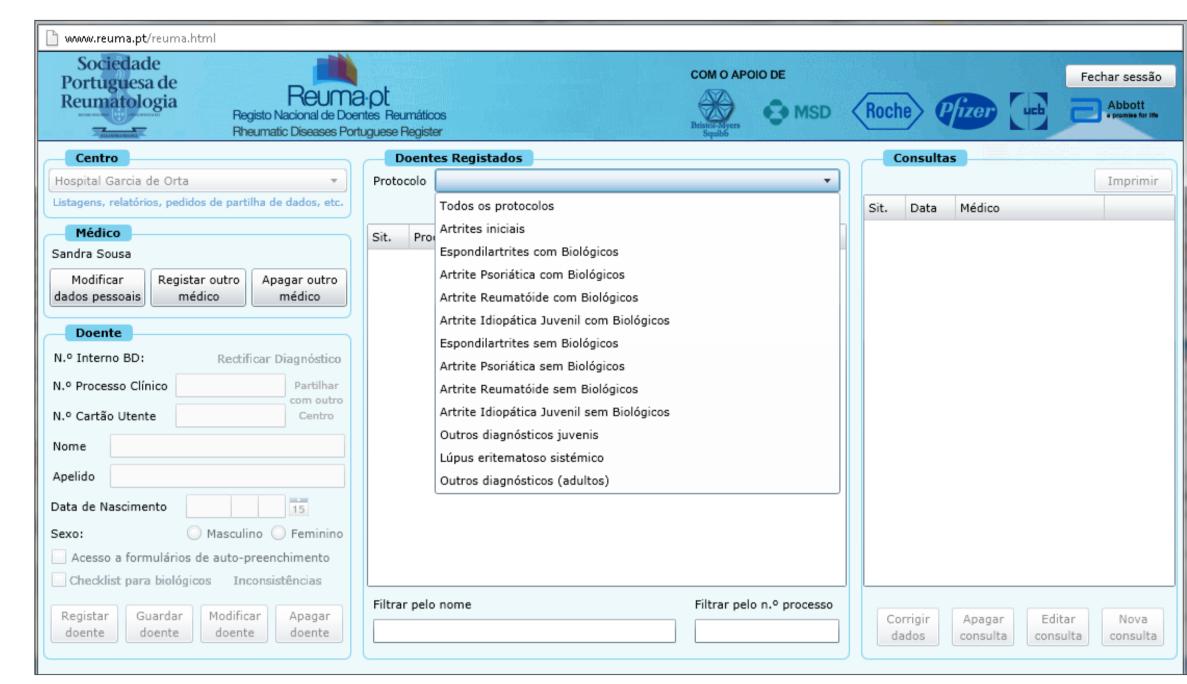


Figure 1 – Main menu of Reuma.pt database

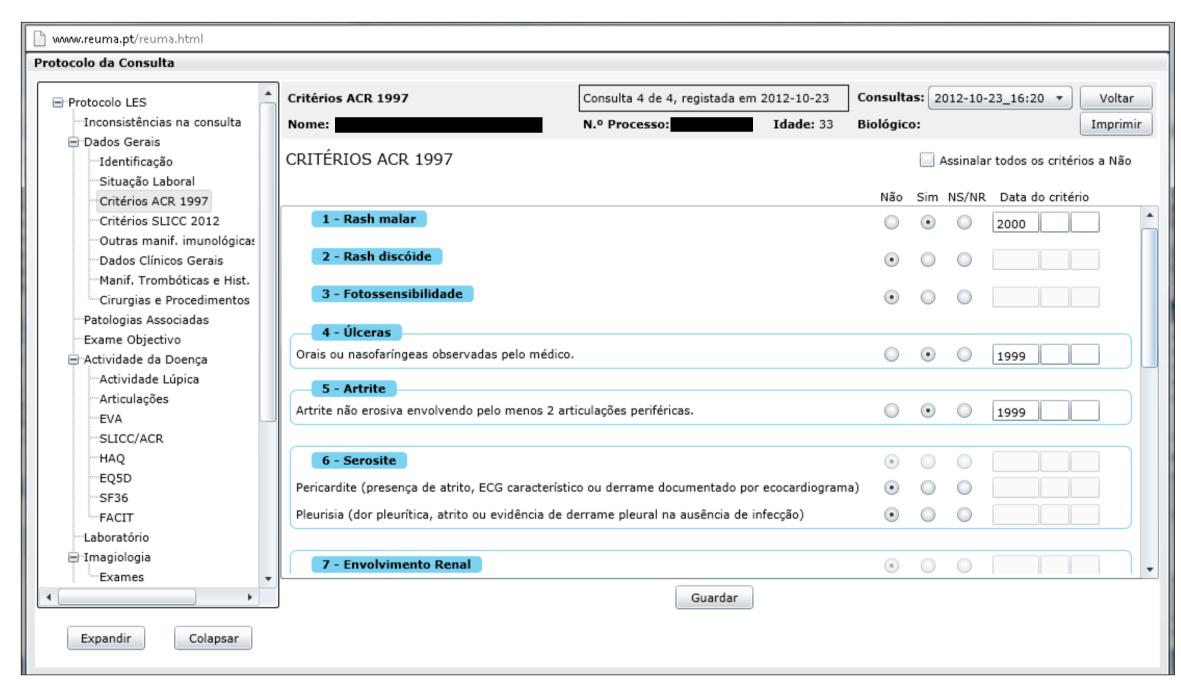


Figure 2 – Reuma.pt screen for SLE patients

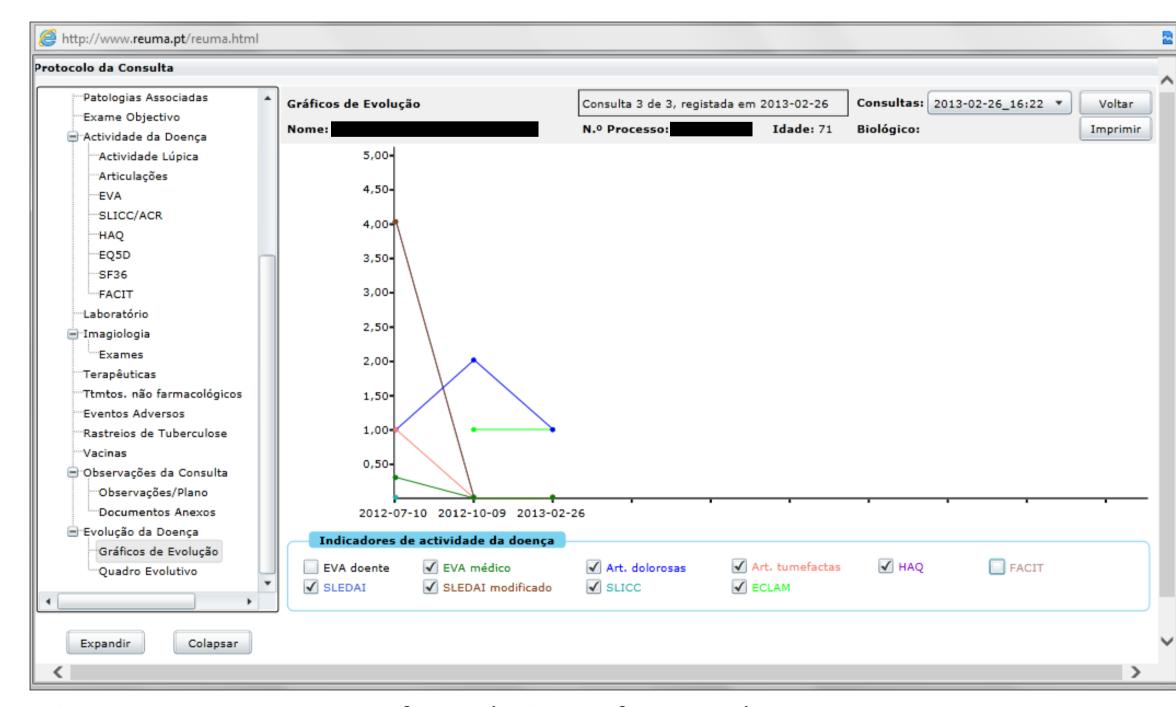


Figure 3 – Reuma.pt screen for evolutionary framework

#### Demographic and clinical characteristics of SLE patients from HGO/HSM

- 305 patients, 95.1% Women, 80% Caucasians
- Number visits/patient: 2,06 +- 2,96
- Mean age at diagnosis: 35.9 ± 14.9 years
- Disease duration at enrollment into Reuma.pt/LES:10.3 ± 7.3 years
- SLE Disease Activity Index (SLEDAI): 3.4 ± 3
- Damage (SLICC): 0.7 ± 1.1
- Comorbidities: Hypertension 27.2%, Diabetes mellitus 8.9%, Hypercholesterolemia
- 3.9%; Cardiovascular diseases 8.9%; Malignancies (except lymphoma) 6.7%

SLE Classification Criteria ACR 1997	Criteria Satisfied
1. Malar rash	45,2%
2. Discoid rash	8,6%
3. Photosensitivity	46,5%
4. Oral ulcers	38,6%
5. Arthritis	82,6%
6. Pleuritis or pericarditis	31,8%
- Pericarditis	23,1%
- Pleuritis	23,5%
7. Renal Disorder	37,1%
- Persistent proteinuria > 0.5 grams /day or > than 3+	36,1%
- Cellular casts	10,5%
8. Neurologic disorder	9,9%
- Seizures	6,8%
- Psychosis	5,3%
9. Hematologic disorder	67,9%
- Hemolytic anemia	11,1%
- Leukopenia	38,1%
- Lyphopenia	45,7%
- Thrombocytopenia	33,6%
10. Immunologic disorder	88,6%
- Anti-DNA in abnormal titer	86,4%
- Antiphospholipid antibodies	33,6%
11. Positive antinuclear antibodies	96,2%

Most Common Therapeutic Options	% Patients
Hydroxychloroquine	93.9%
Corticosteroids	75.1%
Immunosuppressive drugs . Azathioprine / Methotrexate / Cyclophosphamide / Mycophenolate mofetil / Cyclosporine / Leflunomide	27% / 15.5% / 7.4% / 4.8% / 3.4% / 1.4%
Biological therapies . Rituximab / Belimumab	5.9% / 0.98%

Safety Data- Adverse events reported	Number
Infections	5
Ocular disorders	4
Blood and lymphatic system disorders	3
Nervous system disorders	3
Gastrointestinal disorders	2
Immune system disorders	2
Vasculopathy	1

# 7 SERIOUS ADVERSE EVENTS Rituximab – seizures (1) and severe infusion reaction (1) Cyclophosphamide - seizures (1),

bacterial pneumonia (1) and septicemia(1) **Azathioprine:** cytopenia (2)

#### Conclusions

Our preliminary data support the important role of Reuma.pt/LES in the evaluation and follow-up of lupus patients. Reuma.pt/LES allows standardized prospective data collection, storage and analysis, with the ultimate objective of improving the quality of care and patient outcomes. At the same time, this registry is a useful tool for scientific research in the field of SLE.