approved for the treatment of active SLE patients not responding to standard of care, without active kidney or neuropsychiatric (NP) involvement.

Objectives: Aim of the study was to analyse 36 months survival of BLM treatment, causes of withdrawal in a monocentric cohort of SLE patients followed-up in a daily practice setting.

Methods: The study was proposed to all the patients starting BLM. After the informed consent was obtained, demographic, clinical and serological data, indication to BLM and concomitant therapies were registered. At baseline and at 6, 12, 24, 36 months of follow-up, disease activity (SLEDAI 2K), DAS28, C3 and C4 levels, anti-dsDNA status and weekly dose of glucocorticoids were recorded. Data were expressed as median-interquartile range; after 6, 12, 24, 36 months, differences in all parameters compared to baseline were evaluated (Student t test). The treatment survival was evaluated by Kaplan-Meier analysis. P value<0.05 were considered significant.

Results: We enrolled 39 Caucasian individual, 38 females, 1 male, with median age of 43 (IQR 7.5) years and median disease duration 14.5 (5.5) years. Indications for starting BLM were: mucocutaneous involvement (n=11,28%), arthritis (n=25,64%), systemic symptoms (n=3,7%) and lung involvement (1 pt,2%). At baseline, all the patients were taking PDN:97% hydroxychloroquine,23% mycophenolate mofetil,23% azathioprine, 5% cyclosporine, 7% methotrexate and 2% thalidomide. Table 1 summarises trend of SLEDAI 2K, C3 and C4, DAS28 (for aricular involvement), prednisone dose and percentage of patients positive for anti-dsDNA during the follow-up. Fourteen out of the 39 patients (35.8%) reached articular involvement), prednisone dose and percentage of patients positive for anti-dsDNA during the follow-up. Fourteen out of the 39 patients (35.8%) reached articular involvement, prednisone dose and percentage of patients positive for anti-dsDNA during the follow-up. Fourteen out of the 39 patients (35.8%) reached articular involvement, prednisone dose and percentage of patients positive for anti-dsDNA during the follow-up. Fourteen out of the 39 patients (35.8%) reached articular involvement, prednisone dose and percentage of patients positive for anti-dsDNA during the follow-up. Fourteen out of the 39 patients (35.8%) reached articular involvement, prednisone dose and percentage of patients positive for anti-dsDNA during the follow-up. Fourteen out of the 39 patients (35.8%) reached articular involvement, prednisone dose and percentage of patients positive for anti-dsDNA during the follow-up. Fourteen out of the 39 patients (35.8%) reached articular involvement, prednisone dose and percentage of patients positive for anti-dsDNA during the follow-up.