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A. Fetal loss without treatment

B. Fetal loss with treatment

C. Live births (irrespective of treatment)

Figure 1. Forest plot of studies included in the meta-analysis regarding pregnancy and treatment outcomes.

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POS0768

THE IMPACT OF ANTI-RO ANTIBODIES IN PREGNANT PATIENTS WITH SYSTEMIC LUPUS ERYTHEMATOSUS AND SJÖGREN'S SYNDROME

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Background: The presence of anti-Ro antibodies in female patients diagnosed with systemic lupus erythematosus (SLE) and primary Sjögren syndrome (SS) in their fertile years raises concern among the medical team due to the risk of neonatal lupus in their newborns (NB). (1)

Objectives: The aim of this study was to determine whether there are differences between the outcome of anti-Ro positive pregnancies in SLE and SS.

Methods: This is a retrospective observational study carried out in a Rheumatology tertiary center. We included anti-Ro positive female SLE and SS patients, who were diagnosed before or during pregnancy and followed in our clinic between 2003-2020. The diagnosis of SLE or SS was established according to the 2012 SLICC criteria and the 2016 EULAR/ACR criteria, respectively. Clinical, immunological and pregnancy parameters were recorded before (where available), during and after pregnancy, as well as maternal risk factors (smoking, BMI,

disease and medication history). Statistical analysis for continuous variables were performed with T-student test and categorical variables with Person Chi-square test, using IBM SPSS Statistics version 20.

Results: Eleven out of 65 anti-Ro positive SLE patients and 10 out of 153 anti-Ro-positive SS patients met the inclusion criteria and had 13 and 12 pregnancies, respectively. The mean age at diagnosis was 24.75 ± 5.19 years for SLE and 31.92 ± 4.05 years for SS, and the mean pregnancy age was 28.33 ± 4.05 years for SLE and 33.17 ± 3.63 years for SS. Nine (81.81%) SLE patients were diagnosed before pregnancy, while 6 (60%) of the SS patients were diagnosed during pregnancy. Two (18.18%) SLE and 1 (10%) SS were smokers, median BMI was 21 for both SLE and SS (1 SS patient was obese), 2 (18.18%) had a history of lupus nephritis, 6 (54.54%) LES patients had secondary antiphospholipid syndrome, out of which 1 had a previous miscarriage. In the SS group there were 3 previous miscarriages, one patient had a history of parotid lymphoma. The majority of both SLE and SS patients had moderate anti-Ro antibody titers (<200 U/ml) before as well as during pregnancy: 6 (46.5%) and 8 (61.53%) in SLE, 5 (41.6%) and 7 (58.3%) in SS. More preterm NB and stillbirths were encountered in SLE mothers, possibly due to the association of secondary antiphospholipid syndrome, both groups encountered 1 pregnancy loss, and cesarean delivery outweighed vaginal ones in both SLE and SS patients. (Table 1)

Table 1. Gestational age and delivery type according to maternal disease

Gestational age	SLE number (%)	SS number (%)
Full-term pregnancy	4 (30.76%)	10 (83.33%)
Late preterm births	4 (30.76%)	1 (8.33%)
Very preterm births	2 (15.38%)	0
Stillbirth	2 (15.38%)	0
Pregnancy loss	1 (7.69%)	1 (8.33%)
Delivery type		
Vaginal	3 (25%)	4 (36.36%)
Cesarean	9 (75%)	7 (63.63%)

Distribution of pregnancy outcome is exhibited in figure 1. There were 4 (33.33%) NB with cutaneous neonatal lupus all from SS mothers, 3 of whom used HCQ before and/or during pregnancy; and there were 5 NB with complete fetal atrioventricular block (AVB), 3 (25%) from SS mothers and 2 (15.38%) from SLE mothers. A history of HCQ usage was recorded in 3 out of these 5 mothers, and all 5 NB with complete fetal AVB were treated with dexamethasone, without success. Two NB died (both from SLE mothers) and 3 NB (all from SS mothers) needed pacemaker implantation. From the latter, 1 developed pacemaker cardiomyopathy and 1 developed sepsis.

Conclusion: Neonatal lupus seems to be more prevalent in anti-Ro positive SS patients than SLE patients, even though no difference was seen in anti-Ro titer between the two diseases. Fetal cardiac arrhythmia may lead to SS diagnosis. Dexamethasone did not improve the outcome of the fetal AVB.

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POS0769

VALIDATION OF THE SIMPLE INDEX FOR DISEASE ACTIVITY OF SYSTEMIC LUPUS ERYTHEMATOSUS IN CHINESE PATIENTS

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