

Supplementary Table 3 Association between various factors and subsequent renal flare in mSACQ patients with SLE treated with equal to or less than 7.5 mg/day of prednisolone-equivalent GC assessed using a Cox proportional hazard model

Factors/covariates of Cox proportional hazard model	Renal flare			
	HR	CL	CU	p-value
Initial prednisolone-equivalent GC dosage (mg/day)	1.120	1.031	1.217	0.008
Decrease in the prednisolone-equivalent GC dosage (mg/day)	1.043	0.992	1.096	0.098
Antimalarial use [yes vs. no]	0.296	0.205	0.427	0.000
Immunosuppressive use [yes vs. no]	0.740	0.506	1.084	0.122
Disease duration (year) [per 1-year increase]	0.988	0.959	1.018	0.425
SLEDAI-2K [per 1-unit increase]	1.149	1.093	1.209	0.000
Age at visit (year) [per 1-year increase]	0.962	0.944	0.980	0.000
Gender [male vs. female]	1.090	0.530	2.241	0.815
Ethnicity [non-Asian vs. Asian]	0.316	0.099	1.005	0.051

Cox proportional hazard model was used to assess the association of 1-mg decrease of prednisolone-equivalent GC dosage and other factors with subsequent renal flare. Factors/covariates except “initial prednisolone-equivalent GC dosage” were those at subsequent visits.

mSACQ, modified serologically active clinically quiescent; SLE, systemic lupus erythematosus; GC, glucocorticoid; HR, hazard ratio; CL, confidence interval lower bound; CU confidence interval upper bound; SLEDAI-2K, Systemic Lupus Erythematosus Disease Activity Index 2000.