

2019 update of the EULAR recommendations for the management of SLE: don't forget chloroquine

Recently, the journal published the 2019 update of the European League Against Rheumatism (EULAR) recommendations for the management of systemic lupus erythematosus (SLE)¹ that we reviewed with great interest. It drew our attention that the lack of mention of chloroquine as another option in the treatment of SLE within the antimalarials drugs, considering this an important omission that should be taken into consideration. It is true that there is a lack of evidence when comparing with hydroxychloroquine but there are some studies that support its use as an equivalent.²⁻⁶ We also agree that because of having a safer drug profile with less side effects, hydroxychloroquine should be preferred over chloroquine; nevertheless, the availability in other regions of the world could be variable and also, we should take into consideration the higher cost of hydroxychloroquine over chloroquine that in middle-income and low-income countries could be a bigger consideration. We understand that the recommendations are aimed mostly to the European community, and even when there have been major efforts to counteract the geographic differences with the developing of recommendations adapted to every region,⁷⁻⁹ we believe from a global perspective that there are countries who continue supporting their clinical decisions on recommendations made by the most important associations in the world. This is the reason, we consider pertinent to highlight this observation.

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