I048  ADULT SLE: SURVIVORS FROM CHILDHOOD ONSET

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Patients who developed lupus in childhood or adolescence arrive in the adult clinic having been exposed to the disease for many years. Since lupus nephritis is more common in childhood/adolescent onset lupus these patients may have a higher incidence of renal damage and chronic renal impairment. It is important to be watchful for onset of end-stage renal failure. Cardiovascular disease, incorporating myocardial infarction and stroke, is considerably more common in patients with SLE than in age/sex matched controls without SLE. The reasons for this are not fully understood but exposure to drugs (e.g. high dose corticosteroids) and to prolonged systemic inflammation may contribute to the increased risk of CVD. Both these factors apply to patients who developed their lupus in childhood or adolescence, so it is important to look out for cardiovascular events especially in those with positive blood tests for antiphospholipid antibodies. Another issue that may arise in these patients is long-term side-effects from having taken medications in childhood and adolescence, for example early onset of osteoporosis and issues related to fertility. Lastly, the consultations in this group of patients may be slightly different from other lupus consultations. They may bring a parent with them and may have definite views about therapy (such as taking corticosteroids) based on their long previous experience of SLE.

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