Gender-dependent differences in the clinical course of lupus nephritis.

Katarzyna Jakuszko¹, Agata Sebastian², Zofia Bednarz¹, Magdalena Krajewska¹, Piotr Wiland², Katarzyna Madziarska¹, Wacław Weyde^{1,3}, Marian Klinger¹



Wroclaw MEDICAL UNIVERSITY

1 Department of Nephrology and Transplantation Medicine, 2 Department of Rheumatology and Internal Medicine, 3 Faculty of Dentistry, Wrocław, Poland

INTRODUCTION AND AIM

Genetic, environmental and hormonal factors are involved in the pathogenesis of systemic lupus erythematosus (SLE). The female sex hormones have a well known impact on the incidence of SLE, which is diagnosed most often in women of childbearing potential. The course of the disease differs in both genders, with more severe symptoms of lupus nephritis (LN) and more rapid progression to end stage renal disease in male patients, however findings are not entirely consistent. The aim of the study was to confirm the influence of gender on the course LN in our cohort of patients.

METHODS

A retrospective study was conducted in 114 patients with diagnosed LN and 55 patients with SLE without renal involvement, including 147 women (87.0%) and 22 men (13.0%).

Patients were evaluated for the presence of clinical manifestations of SLE, based on American College of Rheumatology (ACR) and Systemic Lupus International Collaborative Clinics (SLICC) diagnostic criteria, the course of disease, as well as immunological and clinical biomarkers of the disease activity. The disease activity was estimated by SLE Disease Activity Index (SLEDAI) and features of renal involvement (rSLEDAI).

RESULTS

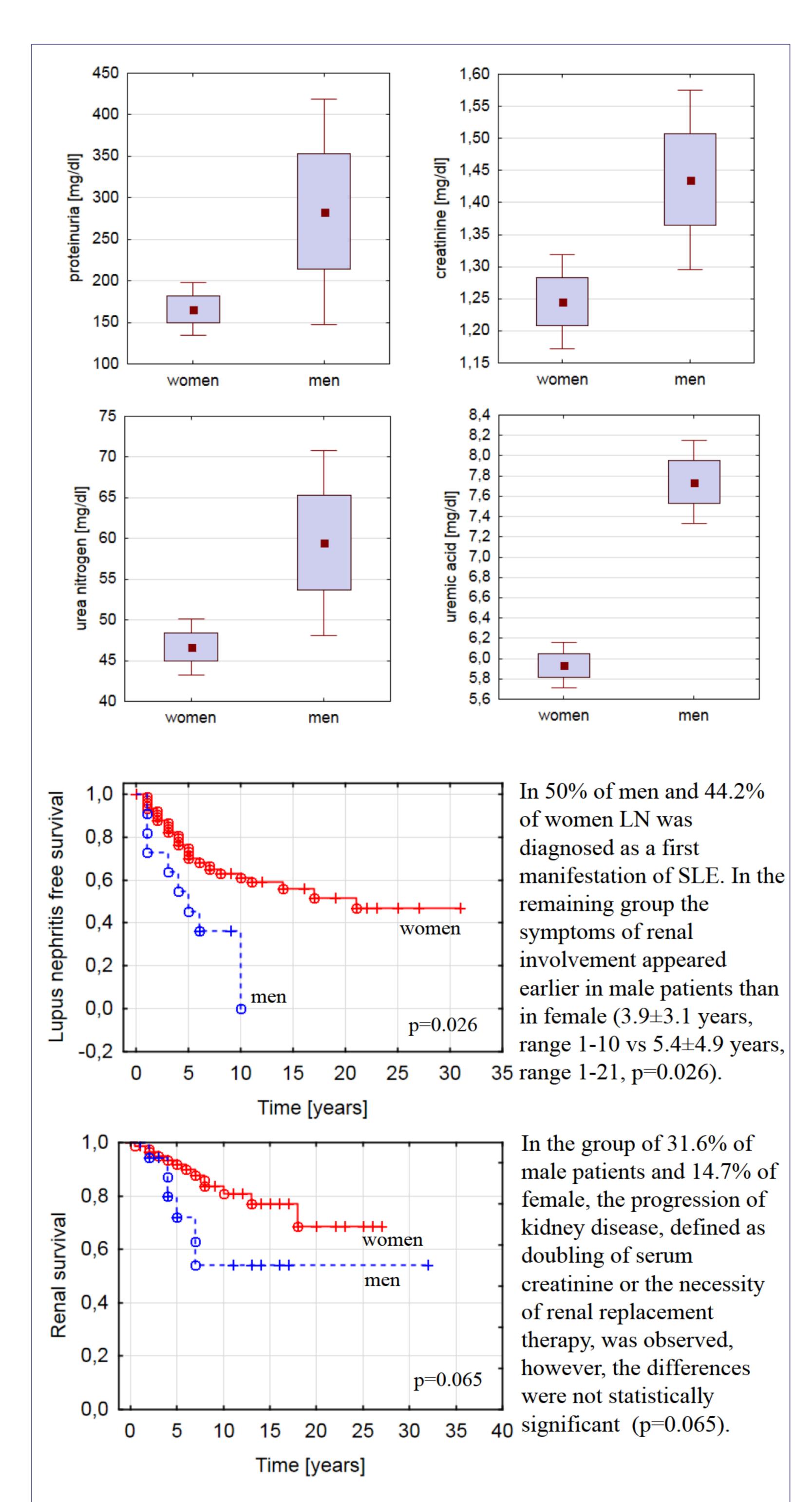
Renal involvement occurred significantly more often in the group of male patients than in female patients (86.4% vs 64.6%, p=0.03) and skin lesions were more common in female group (81.6% vs 54.5%, p=0.007). Disease duration, age at SLE and LN diagnosis didn't differ in both gender.

There were no differences between the number of fulfilled ACR and SLICC diagnostic criteria according to gender. No differences in the activity of SLE and LN assessed by SLEDAI and rSLEDAI in both genders were found.

Group	Women (n=147)	Men (n=22)	p value	
LN [n, (%)]	95 (64.6%)	19 (86.4%)	0.03	
Skin lesions [n, (%)]	120 (81.6%)	12 (54.5%)	0.007	
age at the time of SLE diagnosis [years]	32.3±14.4 (30.0)	33.8±17.1 (26.0)	0.82	
age at the time of LN diagnosis [years]	32.9±15.0 (28.0)	32.6±14.6 (28.0)	0.89	
disease duration [years]	10.7±7.4 (10.0)	9.9±7.9 (7.5)	0.56	
ACR	5.48±1.46 (5.0)	5.14±1.25 (5.0)	0.35	
SLICC	6.05±1.83 (6.0)	5.91±1.6 (5.5)	0.92	
SLEDAI	13.2±7.1 (12.0)	15.0±8.2 (14.0)	0.18	
rSLEDAI	5.9±4.9 (4.0)	7.3±4.9 (8.0)	0.08	

The clinical indicators of the LN activity were significantly higher in men than in women.

Group	Women	Men	p value
proteinuria [mg/dl]	166.0±279.5 (72.5)	283.6±426.9 (105.5)	0.048
creatinine [mg/dl]	1.25±0.64 (0.99)	1.44±0,46 (1.54)	0.0002
urea nitrogen [mg/dl]	46.7±28.4 (38.0)	59.5±36.2 (48.0)	0.008
uremic acid [mg/dl]	5.93±1.85 (5.7)	7.74±1.28 (7.5)	<0.0001



CONCLUSIONS

The study confirmes the statistically significant higher prevalence and severity of lupus nephritis in male patients.

REFERENCES:

[1] Faezi ST1, Hosseini Almodarresi M, Akbarian M, et al. Clinical and immunological pattern of systemic lupus erythematosus in men in a cohort of 2355 patients. Int J Rheum Dis. 2014 Feb 14. [2] Schwartzman-Morris J, Putterman C. Gender Differences in the Pathogenesis and Outcome of Lupus and of Lupus Nephritis. Clinical and Developmental Immunology Volume 2012 (2012), Article ID 604892





