

# Clinical comparison of new criteria for systemic lupus erythematosus in a colombian cohort

Sebastian Herrera\*<sup>1</sup>, Juan Camilo Diaz-Coronado<sup>1, 2</sup>, Deicy Hernandez-Parra<sup>1</sup>, Yecenia DurangoDurango<sup>1</sup>, Carolina Perez-Rios<sup>1</sup>, Marcela Posada-Velásquez<sup>1</sup>, Veronica Romero Mouthon<sup>1</sup>, Jennifer Rojas-Londoño<sup>1</sup>, Manuela Vallejo-Patiño<sup>1</sup>, Carlos Guerrero-Calderón<sup>1</sup>, Katherine Marín<sup>1</sup>, Sara Jaramillo<sup>1</sup>, Veronica Usuga-Graciano<sup>1</sup>, Martha Isabel López-Flórez<sup>1</sup>, Camilo Restrepo-Raigosa<sup>1</sup>, Juan Pablo Restrepo-Hincapié<sup>1</sup>, Catalina Carvajal-Naranjo<sup>1</sup>, Ricardo Pineda.Tamayo<sup>1</sup>

**1.** Artmedica IPS, Grupo de información clínica, Medellín, Colombia,

**2.** CES University, Departamento medicina interna, Medellín, Colombia

## Background:

Systemic Lupus Erythematosus (SLE) is a heterogeneous disease and there has been several classification criteria for the diagnosis. These have considered multiple variables and have strived for increased sensibility and specificity. Recently, both EULAR and ACR have proposed new criteria for the disease classification that demand a positive antinuclear antibodies (ANA) to apply them.

## Methods:

A cross-section retrospective study was done with the data collected from clinical records between 2014 and 2018 from a population diagnosed with SLE by a group of rheumatologists in an autoimmunity reference Colombian centre and were followed up for one year. The new 2019 EULAR/ACR classification criteria were applied to the collected data from the clinical records. The three sets of criteria were compared and a concordance analysis was performed using Cohen's kappa coefficient.

## Conclusion:

There is a moderate agreement between the SLICC 2012 diagnostic criteria and EULAR/ACR 2019 classification in our population. Previous studies shown a sensitivity of 96.1% and specificity of 93.4% on the 2019 criteria, in our cohort the sensitivity was 93% but in contrast the specificity was 67%. A possible explanation could be the negative ANA test seen in 5% of the patients that would force to rule out the diagnosis with a possible false negative result. Despite this situation, the agreement of the criteria is good and should continue to be applied in our population, without abandoning the expert's clinical experience.

## Objectives:

To compare the 2019 EULAR/ACR classification criteria (1) with the Systemic Lupus International Collaborating Clinics (SLICC) 2012 classification criteria (2) and the American College of Rheumatology (ACR) 1997 classification criteria in a Colombian cohort (3).

## Results:

We obtained information of 480 patients. 96% were females, ANA test was available for 95% of the patients. According to SLICC classification criteria the diagnosis of SLE was done in 92% of the patients, 81% by ACR 1997 and 89% for ACR/EULAR 2019. The sensibility was 93% and 97% for ACR/EULAR 2019 and SLICC 2012, and the specificity was 67% and 48% respectively. The concordance analysis between the two sets of criteria showed agreement of 92% (kappa 0.52 p <0.001) in the whole group.

## References:

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