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KEY WORD: SYSTEMIC LUPUS ERYTHEMATOSUS / SURVIVAL / CAUSES OF DEATH

WANIDA WONGYAOPHA : PROBABILITY OF SURVIVAL AND CAUSES OF DEATH OF SYSTEMIC LUPUS ERYTHEMATOSUS IN RHEUMATOLOGY CLINIC AT CHULALONGKORN HOSPITAL DURING 1982 - 1987. THESIS ADVISOR : PROF. UTIS DEESOMCHOK M.D., ASSO. PROF. TITAWATE TUMRASVIN, M.D. 98 pp. ISBN 974-582-847-

The study of the probability of survival and causes of death of systemic lupus erythematosus (SLE) in Rheumatology Clinic of Chulalongkorn Hospital during 1982 - 1987 was performed. The 85 patients who met the American Collage of Rheumatology criteria for diagnosis of SLE were studied. The cumulative survival probability of SLE after diagnosis at 1, 5 and 10 years are 97.64%, 86.75% and 77.83%, respectively. The patients with serum creatinine > 2 mg/dl, proteinuria > 3.5 gm/day, active urine sediment, or serositis, have lower survival probability than the patient whose serum creatinine < 2 mg/dl, proteinuria < 3.5 gm/day, inactive urine sediment, or without serositis. There is no difference in servival probability among the group of patients with or without neurologic involvement, with or without hematologic involvement. The patients with renal and hematologic involvement have higher survival probability than those with renal and neurologic involvement or those with renal involvement alone.

The major cause of death was the infection (50% of total number of death) followed by active disease (38.88%). The tuberculou~~s~~ infection was the most common organism (33.33%) followed by nocardial infection (22.22%). The major site of infection was pulmonary region (38.5%) followed by urinary tract, brain and gastrointestinal tract.

In conclusion, overall survival probability of our lupus patient is 77.83% of total at 10 years after diagnosis and the major causes of death are infection and disease activity. So that the better care including disease activity controlled and searching for infection with proper treatment are the important means for improving the survival probability in the patient with systemic lupus erythematosus.