



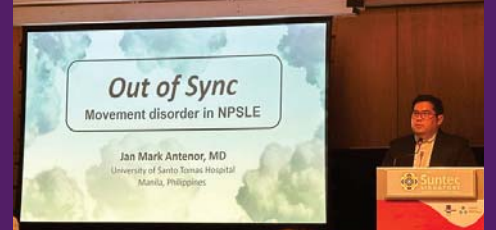
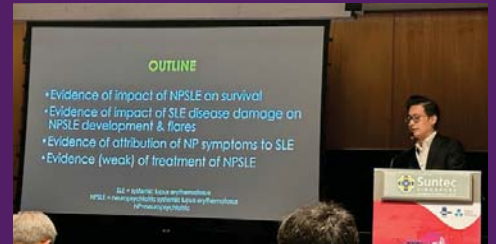
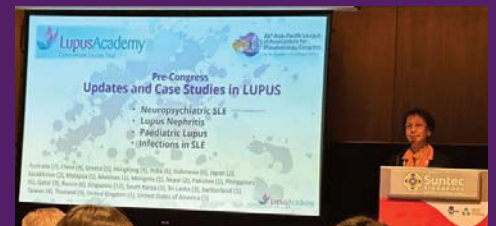
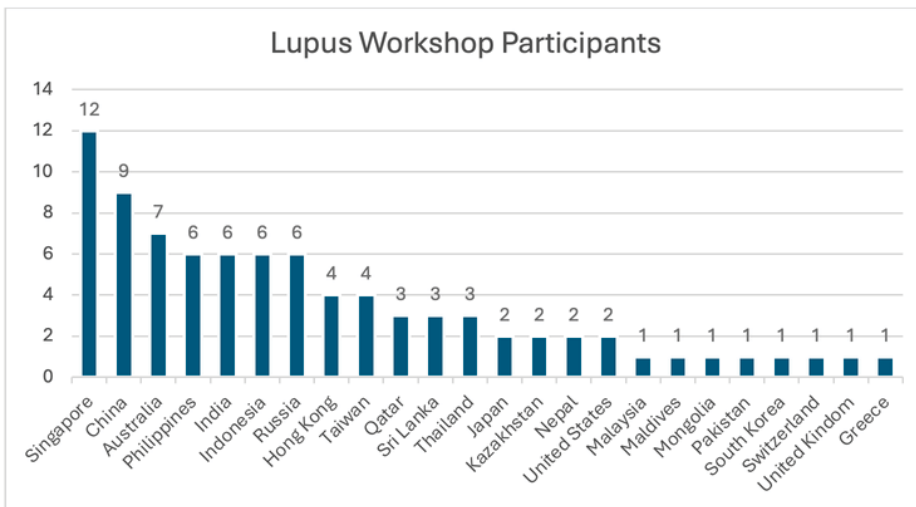
# Continuing Lupus Education in the Garden City of Asia Pacific

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**Lupus Workshop Faculty.** Left to Right: Prof. Chak Sing Lau, Dr. Jan Mark Antenor, Dr. Maria Theresa Collante, Prof. Sandra Navarra, Dr. Pauline Chan, Prof. Ansel Mak, Associate Prof. Elizabeth Ang, Dr. Chevie Wirawan, and Dr. Shirley Chan.

Singapore, August 22, 2024 — The 26th Asia-Pacific League of Associations for Rheumatology (APLAR) Congress, was held for the first time in Singapore at the Suntec Convention & Exhibition Centre. Co-organized by the **Lupus Academy** - an organization dedicated to improving patient outcomes in systemic lupus erythematosus (SLE) and allied diseases - the APLAR Congress brought together leading experts for a Lupus Workshop to discuss updates & challenging case studies. This was attended by 85 rheumatologists and trainees to SRO capacity from many parts of the world (Figure 1), who enthusiastically participated and shared their insights on the complexities of SLE management.



**Lupus Workshop in progress.** Top to bottom: Professor Sandra Navarra, representing the Lupus Academy, opened the APLAR 2024 Lupus Workshop; Professor Anselm Mak outlining his talk on neuropsychiatric SLE (NPSLE); and Dr. Jan Mark Antenor presenting a case on NPSLE for discussion to apply the concepts.

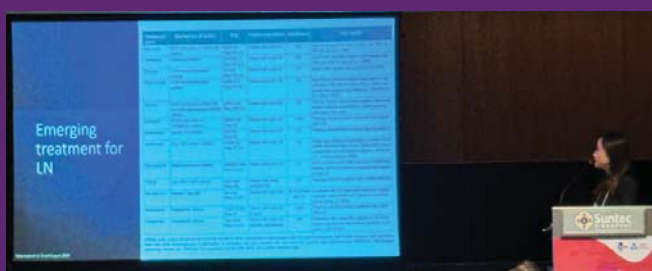
Professor Sandra Navarra from the Philippines opens the day's agenda, emphasizing the importance of continuous learning and collaboration in lupus care. Her words were more than an introduction but a call to action: a reminder of the profound impact that dedicated research and thoughtful discussion can have on patient care. As she outlined the day's agenda, there was an understanding that each presentation and case study had the potential to enrich knowledge in order to transform lives.

## Into the Depths of Neuropsychiatric Lupus

The session began with Professor Anselm Mak from Singapore, who introduced the intricate world of neuropsychiatric lupus. His presentation unraveled with clarity the complexities of how lupus affects the brain. The audience listened intently, absorbed by the interplay between the clinical and the personal. Dr. Jan Mark Antenor from the Philippines then presented a case study that illustrated these issues, showing the challenges and successes of a patient's journey. The following discussion combined various experiences and ideas, offering both hope and practical solutions.

### ✓ Neuropsychiatric SLE

- NPSLE impacts negatively on survival in SLE patients.
- Attribution of NP events require thorough investigation exclusion of associated factors and inclusion of favoring factors.
- Mild NP symptoms are believed not to be related to SLE.
- SLE-related NP syndromes are likely associated with active SLE.
- IV steroid + immunosuppressive therapy are the mainstay treatment.
- Thrombotic NP manifestations and/or presence of aPLs warrant anticoagulation.
- Symptomatic and supportive treatment are essential in SLE patients with NP symptoms.
- **Hydroxychloroquine should be considered in all patients, shown to lessen seizures and reduce white/gray mater loss.**



**Key Insights on Lupus Nephritis.** Top to bottom: Professor C.S. Lau and Dr. Shirley Chan spearheaded the Lupus Nephritis segment, presenting updates on lupus nephritis and its emerging therapies.

## Navigating Lupus Nephritis

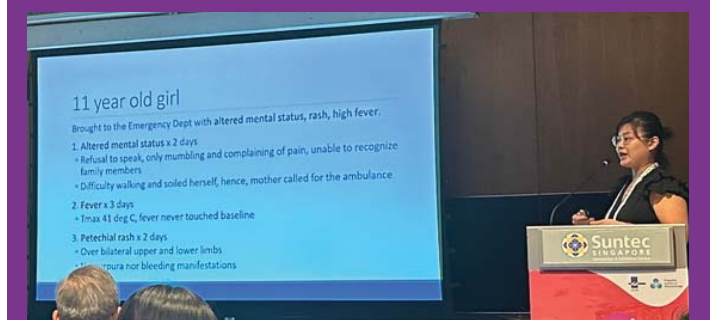
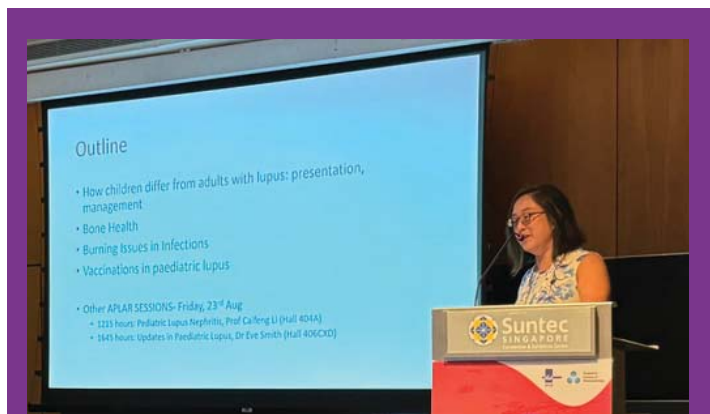
As the morning progressed, attention focused on lupus nephritis. Professor Chak Sing Lau from Hong Kong SAR took the floor, guiding the audience through recent advancements & emerging treatments. His update was both comprehensive and insightful, offering clarity in the often-turbulent sea of nephritis management. Dr. Shirley Chan's case study then added depth to the discourse, presenting a real-world scenario that challenged the audience to think critically about current practices.

### ✓ Lupus Nephritis

- **LN affects 50-60% of SLE patients, especially early in the disease.**
- Early proteinuric response predicts a good long-term renal outcome.
- Induction treatment should consider inter-ethnic differences, disease severity, risk factors, comorbidities, and patient preferences.
- Multiple factors influence treatment response; addressing these is crucial for managing unsatisfactory or refractory cases.

## Exploring Pediatric Lupus and Infections

After a short break, Associate Professor Elizabeth Ang from Singapore took the floor to talk about the essentials of pediatric lupus. Her presentation laid a foundational understanding critical for managing lupus in younger patients. Her words painted a picture of young patients and the unique hurdles they face. The session was a poignant reminder of the vulnerability of the youngest patients and the need for tailored approaches.



**Pediatric Rheumatologists and their Clinical Narratives.** Top to bottom: Associate Professor Elizabeth Ang from Singapore introduced the essentials of pediatric lupus, laying a critical foundation for managing the disease in younger patients. Her presentation highlighted the unique challenges faced by these vulnerable patients. Dr. Pauline Chan and Dr. Ma. Theresa Collante further enriched the session by sharing personal narratives, bringing the human side of lupus care to the forefront.



## ✔ Pediatric Lupus

- Tend to have more acute onset, multi-organ
- Onset and course more fulminant
- **2-3 times higher mortality**
- increased need for corticosteroids

## ✔ Lupus and Infection...

- Have a high index of suspicion for infection
- Look hard for specific microbiological or tissue diagnosis
- **Know your local epidemiology**
- In any febrile patient, consider MAS/HLH (Note: trend in WBC, platelets; ferritin)
- **Do not abruptly stop chronic steroids, risk of adrenal insufficiency**
- **Continue HCQ** (*immunomodulatory* but not immunosuppressive).



Prof. Sandra Navarra revisited the issue of infections in SLE, emphasizing the delicate balance between managing lupus and preventing infections. Dr. Chevie Wirawan's case study provided practical insights into this critical area, sparking discussions that effectively bridged the gap between theory and practice.

### Bringing it all Together

As the congress neared its end, the case studies on difficult infections and pediatric lupus took center stage. Presentations by Dr. Pauline Chan and Dr. Ma. Theresa Collante added personal narratives to the scientific discussions, illustrating the human side of lupus care.

## ✔ ... Infection and Lupus

- SLE patients are more susceptible to infections than general population
- Always search for a focus of infection in a febrile lupus patient
- SLE flare can simulate the features of a systemic infection
- Note that inflammatory signs of infection may be obtunded in immunosuppressed patients
- SLE flare and systemic infection often co-exist. In case of doubt, TREAT as BOTH!

The final panel discussion, featuring Prof/s Mak, Lau, Navarra and Associate Prof Ang, was a fitting conclusion—a collaborative synthesis of the day's learnings, offering a glimpse into the updates on lupus research and treatment.



## A Day of Transformation

The 26th APLAR Congress was more than a series of presentations and discussions; it was a journey through the landscape of lupus care, marked by moments of profound insight and shared determination. As the day concluded, attendees left with a renewed sense of purpose, armed with new knowledge and connections that would drive their efforts forward. In the quiet aftermath of the congress, the echoes of dialogue and discovery lingered, a testament to the enduring impact of collaborative inquiry in the quest to improve the lives of those affected by lupus.