

The new approaches in the treatment of systemic lupus erythematosus.

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Introduction. In recent years, the incidence of SLE has increased. The variety of clinical manifestations have an undulating course with alternating remissions and exacerbations, which make this disease one of the most difficult to diagnose, treat and evaluate the effectiveness of therapy. Despite the fact that half of patients starts with low SLE activity, the disease progresses in the future is affecting many organs and systems.

The purpose This article presents the new approaches and recommendations in the treatment of Lupus the peculiarities of the evolution and activity of the disease.

Material and methods: When carrying out this study, we analyzed a group of patients diagnosed with systemic lupus erythematosus, which includes the years 2020-2022, patients admitted to the rheumatology and arthralgia department, within the Republican Hospital of the Republic of Moldova.

Results. Considering that the treatment must be guided according to the activity and severity of the disease, with a moderate activity index were detected 17,4 %patients, with high activity 82,6% patients. We have established that the first-line therapy in patients with non-life-threatening SLE are glucocorticosteroids, hydroxychloroquine, NSAID.

In case of vitally dangerous organic damage with high activity of the disease in treatment se use immunosuppressants (CYC, Azathioprine, MMF, Methotrexate and/or drugs biological (Belimumab, Rituximab).

Conclusions. in the care of systemic lupus erythematosus:

the manifestation of the disease evolves depending on the activity of the disease, the developed lesions, which will define the treatment strategies for the sick.

Keywords: management, activity of the disease, immunosuppressive treatment, treatment guidelines.