

## SLE as a hematological problem

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SLE can present with hematological manifestations alone or along with musculoskeletal, skin or other system involvement. In cases with hematological abnormalities as the predominant or only manifestation, the diagnosis may be delayed or missed at the time of presentation, if the index of suspicion is low or if there is improper and inadequate follow up. An observational study was conducted in our institution with the purpose of estimating the proportion of SLE with hematological manifestations as the initial presentation of the disease. It was observed that 76.8% of the patients had hematological manifestations at presentation. Thus hematological manifestations were found to be the most common presenting manifestation of SLE in people of North Kerala. One of the common coexisting abnormalities in patients with initial hematological presentation was autoimmune hypothyroidism, which is not included in the ACR criteria. The most common abnormalities were ITP, autoimmune haemolysis and APLA. There was inverse association of arthritis with hematological manifestations. SLE is more of a Hematological disorder rather than a Rheumatologic disorder. A significant number do not satisfy the ACR criteria at the time of diagnosis but do so on follow up. The ACR criteria are weak to diagnose such patients and therefore needs revision. We have developed an alternative to ACR criteria as "Kozhikode Criteria for SLE" which will be presented.

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