|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Symptom | RR | 95% CI | P value | Z score | SLE vs RA |
| Fatigue | 0.55 | (0.44-0.69) | 0.02 | 0.07 | Decrease risk |
| Headache | 0.58 | (0.43-0.78) | 0.05 | 0.69 | \*No significance |
| Arthralgias | 0.7 | (0.5-0.99) | 0.18 | 0.43 | \*No significance |
| Myalgias | 0.82 | (0.62-1.07 | 0.291 | 0.18 | \*No significance |
| Palpitations | 1.3 | (1.15-1.64) | 0.166 | 0.26 | \*No significance |
| Skin lesions | 0.66 | (0.42-1.05) | 0.171 | 0.29 | \*No significance |
| Depression | 0.73 | (0.39-1.39) | 0.274 | 0.84 | \*No significance |
| Smell disorders | 0.66 | (0.42-1.05) | 0.171 | 0.13 | \*No significance |
| Taste disorders | 1.1 | (0.85-1.44) | 0.393 | 0.12 | \*No significance |
| Dyspnoea | 0.78 | (0.51-1.19) | 0.286 | 0.7 | \*No significance |
| Memory and/or concentration alterations | 0.61 | (0.15-2.38) | 0.244 | 0.68 | \*No significance |
| Hair loss | 1.2 | (0.98-1.45) | 0.291 | 0.92 | \*No significance |

Table 4. Comparison of the symptoms between RA and SLE.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Symptom | RR | 95% CI | P value | Z score | SLE vs MISC |
| Fatigue | 0.57 | (0.44-0.73) | 0.046 | 0.21 | Decrease risk |
| Headache | 0.76 | (0.56-1.04) | 0.241 | 0.98 | \*No significance |
| Arthralgias | 0.47 | (0.31-0.7) | 0.028 | 0.06 | Decrease risk |
| Myalgias | 0.76 | (0.56-1.04) | 0.241 | 0.3 | \*No significance |
| Palpitations | 0.8 | (1.61-1.03) | 0.263 | 0.96 | \*No significance |
| Skin lesions | 0.66 | (0.4-1.08) | 0.185 | 0.86 | \*No significance |
| Depression | 0.48 | (0.22-1.06) | 0.087 | 0.35 | \*No significance |
| Smell disorders | 1.08 | (0.73-1.59) | 0.43 | 0.77 | \*No significance |
| Taste disorders | 1.08 | (0.8-1.47) | 0.417 | 0.37 | \*No significance |
| Dyspnoea | 0.9 | (0.58-1.39) | 0.413 | 0.47 | \*No significance |
| Memory and/or concentration alterations | 0.51 | (0.11-2.34 | 0.181 | 0.41 | \*No significance |
| Hair loss | 1.4 | (1.14-1.71) | 0.169 | 0.25 | \*No significance |

Table 5. Comparison of the prevalence of symptoms between SLE and Miscellaneous.

Gráfico

Descripción generada automáticamente

Figure 1. Comparison of risk of developing sequels in the long COVID syndrome in lupus erythematosus patients and rheumatoid arthritis patients. IC 95%

Gráfico

Descripción generada automáticamente

Figure 1. Comparison of risk of developing sequels in the long COVID syndrome in lupus erythematosus patients and miscellaneous patients. IC 95%