

## Advances in systemic lupus erythematosus reviewed

Recent major developments have occurred in the management of systemic lupus erythematosus (SLE), say Dr Guillermo Ruiz-Irastorza from St Thomas' Hospital, London, UK, and colleagues.

In their review, they say that only 10 randomised controlled trials involving patients with SLE were published during 1995–2000. Treatment regimens included cyclophosphamide, methylprednisolone, IV immunoglobulins, chloroquine, methotrexate and hormonal treatment such as prasterone [dehydroepiandrosterone]. Data on the efficacy of these treatments are not clinically significant, say Dr Ruiz-Irastorza and colleagues.

### Some encouraging results

Data from prospective studies indicate that cyclosporin and thalidomide are associated with good clinical response and IV immunoglobulin therapy has achieved short-term relief of fever, arthritis and thrombocytopenia in patients with lupus. Mycophenolate mofetil has demonstrated efficacy in patients with proliferative nephritis.

In patients with severe SLE, autologous stem cell transplantation after immunoablative chemotherapy has shown '*encouraging*' results, say Dr Ruiz-Irastorza and colleagues. They go on to say that experience with other new therapies such as cladribine, fludarabine, tacrolimus and nafrigel [DP-1904] '*can be regarded as anecdotal*'.