LUPUS CONFIRMED AS RISK FACTOR FOR CERVICAL CANCER
Women with lupus treated with immunosuppressives need regular cervical screening

London, United Kingdom, 9 June 2016: The results of a study presented today at the European League Against Rheumatism Annual Congress (EULAR 2016) found a doubled risk of pre-malignant cervical changes, and potentially also an increased risk of cervical cancer, among women with Systemic Lupus Erythematosus (SLE) compared to the general female population. The highest risks were found in women with SLE who were treated with immunosuppressant drugs. These findings highlight the importance of regular cervical screening in all women with SLE, regardless of whether the increased risk is due to disease severity or treatment. ¹

“Previous evidence that SLE or its treatment might increase the risk of cervical neoplasia has been inconclusive,”²,³ said lead investigator Dr Hjalmar Wadström from the Department of Medicine Solna, Karolinska Institutet, Stockholm. “Our findings have confirmed that SLE is a risk factor for cervical malignancies, even after adjusting for important risk determinants such as previous cervical screening.”

SLE is a chronic inflammatory disease that can affect any organ and system, but mainly involves the joints, kidneys and skin. SLE predominately affects women, occurring 10 times more often than in men, and often starting when they are in their 20s and 30s.⁴

Between 2006 and 2012, the rate of cervical dysplasia or invasive cervical cancer among a cohort of women with SLE was twice the rate in a matched general population (adjusted for age, sex, education level, healthcare utilisation, number of children, marital status, family history of cervical cancer, and prior cervical screening). The rate was higher among those women treated with a systemic immunosuppressive drug, compared to those treated with only an antimalarial without additional immunosuppressive treatment.

Results were similar for the risk of cervical dysplasia at different stages of severity, however, this comparison was less significant due to limited numbers of events and follow-up time.
NOTES TO EDITORS:

For further information on this study, or to request an interview with the study lead, please do not hesitate to contact the EULAR congress Press Office in the London Suite at ExCel London during EULAR 2016 or on:

Email: eularpressoffice@cohnwolfe.com
Onsite tel: +44 (0) 7725 915 492 / +44 (0) 7786 171 476
Twitter: @EULAR_Press
Youtube: Eular Pressoffice

About EULAR
The European League Against Rheumatism (EULAR) is an umbrella organisation which represents scientific societies, health professional associations and organisations for people with Rheumatic Musculoskeletal Diseases (RMD) throughout Europe.

EULAR aims to promote, stimulate and support the research, prevention, and treatment of RMD and the rehabilitation of those it affects.

EULAR underlines the importance of combating rheumatic diseases not only by medical means, but also through a wider context of care for rheumatic patients and a thorough understanding of their social and other needs. EULAR is supported in this mission by its 45 scientific member societies, 36 PARE (People with Arthritis/Rheumatism in Europe) organisations, 22 HPR (Health Professionals in Rheumatology) associations and 23 corporate members.

The EULAR Annual European Congress of Rheumatology is the foremost international medical meeting announcing the latest research on rheumatic and musculoskeletal diseases. EULAR 2016 is expected to attract over 14,000 delegates from around 120 countries. Most if not all professions working in the vast field of RMD will be represented.

To find out more about the activities of EULAR, visit: www.eular.org
References

1 EULAR 2016; London: Abstract OP0189