

Supplementary Online Content

Wieczorek IT, Probert KJ, Okawa J, Werth VP. Systemic symptoms in the progression of cutaneous to systemic lupus erythematosus. *JAMA Intern Med*. Published online January 29, 2014. doi:10.1001/jamadermatol.2013.9026

eTable 1. Severity of Systemic Symptoms based on the BILAG2004 (British Isles Lupus Assessment Group's activity index)

eTable 2. Data From Telephone Interviews for Patients Not Seen for >1 Year

This supplementary material has been provided by the authors to give readers additional information about their work.

eTable 1: Severity of Systemic Symptoms based on the BILAG2004 (British Isles Lupus Assessment Group's activity index¹

Symptoms	Mild	Moderate to Severe
Musculoskeletal	Arthralgia Myalgia	Arthritis Myositis
Hematological	Evidence of hemolysis and Hemoglobin \geq 10g/dl Hemoglobin 8-10.9 g/dl (without hemolysis) or Hct 25-35 White cell count $1-3.9 \times 10^9/l$ Neutrophil count $0.5-1.9 \times 10^9/l$ Lymphocyte count $< 1.0 \times 10^9/L$ Platelet count $50-100 \times 10^9/l$	Evidence of hemolysis and Hemoglobin < 9.9 g/dl Hemoglobin < 8 g/dl (without hemolysis) or Hct < 25 White cell count $< 1.0 \times 10^9/l$ Neutrophil count $< 0.5 \times 10^9/l$ Platelet count $< 50 \times 10^9/l$
Renal	Urine dipstick 1+	Urine dipstick 2+ or more 24 hour urine protein ≥ 0.5 g Urine protein-creatinine ratio ≥ 50 mg/mmol Urine albumin-creatinine ratio ≥ 50 mg/mmol Plasma creatinine > 130 μ mol/l GFR < 50 ml/min per 1.73 m ²
Cardiopulmonary	Pleurisy/Pericarditis Cardiac Myositis	Cardiac tamponade Pleural effusion with dyspnea Cardiac Myositis with evidence of heart failure
Neurological	Seizure disorder Cerebrovascular disease (not due to vasculitis) Cognitive dysfunction Lupus headache (severe unremitting)	Aseptic meningitis Cerebral vasculitis Demyelinating syndrome Myelopathy Psychosis Mononeuropathy Cranial neuropathy Plexopathy Polyneuropathy Status epilepticus Cerebellar ataxia

1. Yee CS, Cresswell L, Farewell V, et al. Numerical scoring for the BILAG-2004 index. *Rheumatology (Oxford)*. 2010;49(9):1665-1669.

eTable 2. Data From Telephone Interviews for Patients Not Seen for >1 Year

	CLE	SLE_c
Patients interviewed, n	6	2
Reporting active skin lesions, n	6	0
Reporting new systemic symptoms, n	2	0
Seeing a physician for LE, n	5	1