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**Pediatric Systemic Lupus: Specificities and Particularities**

**Introduction:** Juvenile systemic lupus (JSL) is a chronic autoimmune disease characterized by multi-visceral impairement and an unpredictable prognosis. The diagnosis of systemic lupus is usually made in young women aged 20 to 40, however, it can set in at any age and will be classified as juvenile (JSL) when it begins before the age of 16.

**Objectives:** To study the characteristics and particularities of a retrospective series of Juvenile Systemic lupus.

**Material and methods:** We report the epidemiological, clinical, therapeutic and evolutionary characteristics of a retrospective series, including 32 cases of children with systemic lupus between 2015 and 2025.

**Results:** The predominance is in females (30 girls and 2 boys), The average age of onset is 12.2 years, the average time of diagnosis is 6.5 months. The clinical picture is made up of joint damage, skin damage , and fever in 90%, 70 % and 60 % of cases respectively, followed by kidney damage in 32% of cases (lupus nephropathy class II to V). Neurological involvement is present in 22% of cases. Cardiac, pulmonary and ophthalmological participation is reported in low percentages. Hematological involvement is detected in blood count in 62.5% of patients and the inflammatory syndrome was almost constant. A positive titer of antinuclear antibodies (ANA) and native anti-DNA is objectified, as well as a reduction in the level of complement. Anti-phospholipid antibodies were positive in 28% of cases. ANCA was positive in only one lupus, RF was present in 3 children, only one case of overlap syndrome with dermatomyositis was reported with positive U1RNP.

**Conclusion:** Lupus is an autoimmune disease with protean clinical manifestations, the prognosis of which is dominated by renal, neurological and thrombotic damage. Cortisone and immunosuppressive treatments have significantly improved the vital prognosis.

