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Introduction:

Systemic lupus erythematosus (SLE) is an autoimmune disease characterized by a wide range of clinical manifestations, ranging from mild to severe forms. Among the severe forms, vascular involvement is relatively uncommon and is primarily reported in patients with a long history of the disease. Digital ischemic lesions are a source of pain, functional impairment, and significant aesthetic damage. Their management is challenging.

We report the cases of four patients with lupus vasculitis, highlighting the diagnostic and therapeutic difficulties.

Patients and Methods:

We reviewed the medical records of four patients hospitalized for the management of systemic lupus erythematosus with vascular involvement.

Results:

We collected four cases, including three women and one man, with an average age of 22 years. The clinical presentation included cyanosis of the extremities and pain, followed by necrosis and digital gangrene after exposure to cold and exertion in one case. Vascular purpura was observed in two cases, one with ulcerations and the other with livedo. The fourth case presented with painful digital nodules. All patients underwent comprehensive vascular investigations, which revealed no arterial abnormalities. Antiphospholipid antibodies (APL) were positive in three patients. All patients received symptomatic treatment and corticosteroids combined with Plaquenil. The outcome was favorable except in one case, which was complicated by digital necrosis requiring necrosectomy.

Conclusion:

Vascular involvement in systemic lupus is severe and necessitates the search for clinical signs of vasculitis, complemented by biological and imaging studies. Prompt management is essential to avoid amputations

