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2025 EULAR RECOMMENDATIONS FOR THE MANAGEMENT OF SLE WITH KIDNEY INVOLVEMENT: OVERVIEW AND APPLICATION IN REAL- LIFE CASES

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Kidney involvement affects a significant proportion (20-60%, depending on racial/ethnic background) of patients with systemic lupus erythematosus (SLE) and has a profound impact on prognosis. The 2025 update of the EULAR recommendations for the management of SLE was based on targeted systematic literature reviews (period 01/2019– 03/2024, taking into consideration also the previous body of evidence), followed by modified Delphi method, to form questions, elicit expert opinions and reach consensus. The process culminated in 4 overarching principles and 13 individual recommendations. These refer to the indispensable role of kidney biopsy for diagnosis and define the targets of therapy and treatment milestones. Further, they recommend combination immunomodulatory therapy for the majority of patients, with glucocorticoids, synthetic immunosuppressives (mycophenolate, cyclophosphamide, calcineurin inhibitors) and biologics (belimumab, obinutuzumab). The value of kidney protective lifestyle measures and drugs is also highlighted, because kidney protection is considered as the second pillar of management in LN, to prevent the occurrence and progression of CKD. The recommendations also provide guidance on the optimal duration of immunosuppressive treatment and drug tapering, family planning, and management of kidney failure.
This lecture will give an overview of the 2025 EULAR recommendations, followed by illustrative patient case scenarios, to assess the implementation potential of these recommendations in everyday clinical practice.

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