KASUS LONGITUDINAL

LUARAN PASIEN LUPUS ERITEMATOSUS SISTEMIK BERAT DENGAN MANIFESTASI ANEMIA HEMOLITIK AUTOIMUN, LUPUS ASSOCIETED HEPATITIS

INTISARI:

Lupus Eritematosus Sistemik (LES) pada anak merupakan penyakit autoimun kronik dengan manifestasi multisistem dan perjalanan klinis yang kompleks. Kami melaporkan kasus seorang anak laki-laki usia 14 tahun yang didiagnosis LES berat berdasarkan kriteria klasifikasi ACR/EULAR 2019, disertai manifestasi anemia hemolitik autoimun (AIHA) dan lupus-associated hepatitis.

Selama pemantauan enam bulan, aktivitas penyakit menunjukkan perbaikan klinis dan laboratorik dengan skor MEX-SLEDAI menurun menjadi 0. Namun, pasien mengalami beberapa efek samping terapi jangka panjang kortikosteroid, meliputi hipertensi okular, osteoporosis, erupsi akneiform, striae distensae, serta gangguan penyesuaian psikologis. Penatalaksanaan multidisiplin, termasuk dukungan nutrisi, pemantauan tumbuh kembang, serta intervensi psikososial, berperan penting dalam perbaikan kualitas hidup pasien.

Kasus ini menyoroti kompleksitas manifestasi LES berat pada anak dengan keterlibatan hematologis dan hepatik, pentingnya diagnosis dini, terapi agresif terkontrol, serta pemantauan ketat terhadap efek samping terapi jangka panjang untuk mencapai luaran klinis yang optimal.

Kata kunci: Lupus Eritematosus Sistemik, Anak, Anemia Hemolitik Autoimun, Lupus-Associated Hepatitis

LONGITUDINAL CASE REPORT

CLINICAL OUTCOME OF A PATIENT WITH SEVERE SYSTEMIC LUPUS ERYTHEMATOSUS PRESENTING WITH AUTOIMMUNE HEMOLYTIC ANEMIA AND LUPUS-ASSOCIATED HEPATITIS

ABSTRACT

Systemic Lupus Erythematosus (SLE) in children is a chronic autoimmune disease characterized by multisystem involvement and a complex clinical course. We report the case of a 14-year-old boy diagnosed with severe SLE based on the 2019 ACR/EULAR classification criteria, presenting with autoimmune hemolytic anemia (AIHA) and lupus-associated hepatitis.

During six months of follow-up, disease activity showed clinical and laboratory improvement, with the MEX-SLEDAI score decreasing to 0. However, the patient developed several long-term corticosteroid-related adverse effects, including ocular hypertension, osteoporosis, acneiform eruption, striae, and adjustment disorder. Multidisciplinary management, including nutritional support, growth and developmental monitoring, and psychosocial interventions, played an essential role in improving the patient's quality of life.

This case highlights the complexity of severe pediatric SLE with hematologic and hepatic involvement, the importance of early diagnosis, controlled aggressive therapy, and close monitoring of long-term treatment-related adverse effects to achieve optimal clinical outcomes.

Keywords: Systemic Lupus Erythematosus, Child, Autoimmune Hemolytic Anemia, Lupus-Associated Hepatitis