European Consensus Lupus Activity Measurement (ECLAM)

Patient No________
Date____________

1. **Generalised manifestations**
   
   Any of the following: **0.5**
   
   Fever = Documented basal morning temperature of 37.5°C not due to an infective process.
   
   Fatigue = A subjective feeling of extraordinary tiredness.

2. **Articular manifestations**
   
   Any of the following: **1**
   
   Arthritis = Non-erosive arthritis involving at least 2 peripheral joints (wrist, metacarpophalangeal or proximal, interphalangeal joints).
   
   Evolving arthralgia = New onset or worsening of specific localised pain without objective symptoms in at least two peripheral joints.

3a. **Active mucocutaneous manifestations**
   
   Any of the following: **0.5**
   
   Malar rash = Fixed erythema, flat or raised over the malar eminences, and tending to spare the naso-labial folds.
   
   Generalized rash = A maculo-papular rash not induced by drugs, that may be located anywhere on the body, and that is not strictly dependent on sun exposure.
   
   Discoid rash = Erythematous, raised patches with adherent keratotic scaling and follicular plugging.
   
   Skin vasculitis = Including digital ulcers, purpura, urticaria, bullous lesions.
   
   Oral ulcers = Oral or nasopharyngeal ulcers, usually painless, observed by a physician.

3b. **Evolving mucocutaneous**
   
   If any of the above mucocutaneous manifestations are new or have worsened since the last 1 manifestations observation, add **1 point**.

4. **Myositis**
   * Confirmed by raised muscle enzymes and/or EMG examination and/or histology. **2**

5. **Pericarditis**
   
   Documented by ECG or rub or evidence of pericardial effusion on ultrasound **1**

6. **Intestinal manifestations**
   
   Any of the following: **2**
   
   Intestinal vasculitis = Evidence of acute intestinal vasculitis.
   
   Sterile peritonitis = Evidence of abdominal effusion in the absence of infective processes.

7. **Pulmonary manifestations**
   
   Any of the following: **1**
   
   Pleurisy = Clinical or radiological evidence of pleural effusion in the absence of infective processes.
   
   Pneumonitis = Single or multiple lung opacities on chest X-ray thought to reflect active disease not due to an infective process.
   
   Ingravescent dyspnoea = Due to an evolving interstitial involvement.

8. **Evolving neuropsychiatric manifest.**
   
   New appearance or worsening of any of the following: **2**
Headache/migraine = Recently developed, persistent or recurrent.
    Poorly responsive to the most commonly used drugs, but partially or
totally responsive to corticosteroids.
Seizures = Grand mal or petit mal seizures, Jacksonian fits, temporal lobe seizures, or
cholecystic syndrome, in
the absence of offending drugs or known metabolic derangements (e.g. uremia,
ketoacidosis or electrolyte imbalance).
Stroke = Cerebral infarction or hemorrhage, instrumentally confirmed
Organic brain disease = Impairment of memory, orientation, perception, and ability to
calculate.
Psychosis = Dissociative features in the absence of offending drugs or known
metabolic derangements, e.g.
    uremia, ketoacidosis or electrolyte imbalance.

9a. Renal manifestations* +
    Any of the following: 0.5
    Proteinuria = At least 500 mg/day.
    Urinary casts = Red cells, hemoglobin, granular, tubular or mixed casts.
    Haematuria = Microscopic or macroscopic.
    Raised serum creatinine or reduced creatinine clearance.

9b. Evolving renal manifestations = If any of the above renal manifestations are new
or have worsened since the last two observations, add 2 points.

10. Haematologic features
    Any of the following: 1
    Non-haemolytic anemia = Coombs-negative normocytic hypochromic or
    normochromic anaemia without reticulocytosis.
    Haemolytic anemia* = Coombs-positive haemolytic anaemia, with reticulocytosis and
elevated LDH, in the absence of offending drugs.
    Leukopenia (or lymphopenia) = Less than 3,500/mm³ WBC (or 1,500/mm³
    lymphocytes) in the absence of offending drugs.
    Thrombocytopenia = Less than 100,000/mm³ in the absence of offending drugs.

11. Erythrocyte sedimentation rate 1
    Raised ESR > 25 mm/h by Westergren or comparable methods, not due to other
concomitant pathological process.

12a. Hypocomplementaemia = reduced plasma level of any of the following: 1
    C3 By radial immunodiffusion or laser nephelometer.
    CH50 By standardized hemolytic methods.
12b. Evolving hypocomplementaemia = significantly reduced level of any of the
    items mentioned above (plus C4) with respect to the last 1

Final score #

* If this system (or manifestation) is the only involvement present from among items 1 -
10, add 2 more points.
+ Excluding patients with end-stage chronic renal disease.
# If the final total score is not an integer number, round off to the lower integer for
values < 6 and to the higher integer for values > 6.
If the final total score is > 10, round off to 10.