The Use of Mycophenolate Mofetil in Non-renal Manifestations of Systemic Lupus Erythematosus

Anselm Mak and Chi-Chiu Mok

Abstract: Systemic lupus erythematosus (SLE) is a multi-system autoimmune disease with protean clinical manifestations warranting the use of immunosuppressive agents. Conventional immunosuppressive agents including corticosteroids, azathioprine, cyclosporine and cyclophosphamide (CYC) are the mainstay of treatment of SLE with major organ involvement. These conventional agents; however, are not ideal as many patients are either refractory or intolerant to them. Thus, equally potent immunosuppressive agents which possess a more favorable side-effect profile are needed. Mycophenolate mofetil (MMF), a drug that has been widely used in solid-organ transplantation for the past decade, is being increasingly employed in SLE for its comparable or even superior efficacy, but lower toxicity when compared to CYC as shown in a number of controlled trials in lupus nephritis. While MMF has been extensively studied in lupus nephritis, it has not been evaluated in controlled trials for non-renal lupus manifestations. In this article, the mechanisms of action of MMF and the evidence of its use in various non-renal manifestations of lupus is briefly reviewed.

Keywords: Lupus, mycophenolate mofetil, non-renal, refractory