

**Supplementary Table S1. Indexes used to define disease activity and response to treatment in SLE**

SLEDAI <sup>1</sup>	SLE disease activity index	Based on the sum of values attributed to 24 differentially weighted descriptors of clinical and laboratory items	(Bombardier et al., 1992)
BILAG <sup>1</sup>	British Isles Lupus Assessment Group.	Grade form <b>A</b> very active, <b>B</b> active, <b>C</b> moderately active, <b>D</b> was active, <b>E</b> never active 9 domains: constitutional, mucocutaneous, central nervous system, musculoskeletal, cardiovascular/respiratory, abdominal, renal, ophthalmic and hematological	(Isenberg et al., 2005)
CLASI	Cutaneous Lupus Erythematosus Disease Area and Severity Index	Measurement instrument for mucocutaneous lupus erythematosus lesions with separate scores for damage and activity.	(Albrecht et al., 2005)
SRI <sup>2</sup>	SLE responder index	Composite index that utilizes SLEDAI score to determine global improvement; BILAG domain scores to ensure no significant worsening; and Physician's Global Assessment (PGA) to ensure that improvements in disease activity are not achieved at the expense of the patient health	(Furie et al., 2009)
BICLA <sup>3</sup>	BILAG-based Composite Lupus Assessment	Composite index that utilizes BILAG-index to determine improvement, SLEDAI score to ensure no significant worsening, and PGA to ensure that improvements in disease activity are not achieved at the expense of the patient health	(Wallace et al., 2011), (Wallace et al., 2014)

1. SLEDAI and BILAG exist in several versions with differences in subtle characteristics, which go beyond the scope of this review.
2. In SRI the improvement in SLEDAI can be gauged at 4, 6, etc points and referred as: SRI (4), SRI (6)
3. Requires improvement in all A and B scores.

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