

Abstract

Systemic lupus erythematosus is a multisystemic autoimmune condition which may present with a wide variety of manifestations. ANA is positive in most cases of SLE and is incorporated into the latest ACR/EULAR classification criteria as the entry criterion. This presents a rare case of a 31-year-old male who presented with dry gangrene of right 4th and 5th fingertips due right ulnar artery thrombosis in a background of nephrotic syndrome which was later diagnosed histologically as class IV/V lupus nephritis with a negative ANA. He was successfully treated with surgical embolectomy and went into complete remission with steroid and cyclophosphamide induction therapy.