

# LUPUS ERYTHEMATOSUS, SYSTEMIC

## (SLE)



### BASIC INFORMATION

#### DESCRIPTION

An inflammatory disease of connective tissue. Lupus is not inherited or cancerous. It involves connective tissue (collagen) that is in many body systems, including joints, skin, kidneys, brain, heart and lungs. SLE can affect all ages and both sexes, but 90% of cases occur in women between ages of 30 and 50.

#### FREQUENT SIGNS AND SYMPTOMS

Lupus symptoms frequently flare up and then subside. Episodes generally include fever and fatigue, plus any 4 of the following:

- Rash, usually on the cheeks.
- Ulcers in the mouth.
- Red palms and hands.
- Joint pain with redness, swelling and tenderness, but no deformity.
- Swelling of the face and legs.
- Shortness of breath.
- Rapid or irregular heartbeat.
- Chest pain.
- Hair loss.
- Swelling of the lymph glands.
- Protein in the urine.
- Increased sensitivity to the sun.
- Anemia.
- Mental changes, including psychosis.

#### CAUSES

Unknown, but lupus is probably an autoimmune disorder. In an autoimmune disorder, the body's immune system functions abnormally and attacks its own normal tissue.

#### RISK INCREASES WITH

- Stress.
- Use of drugs, such as hydralazine, procainamide, methyldopa and chlorpromazine.
- Genetic factors. The incidence is higher among blacks, Hispanics, Native Americans and Asians.

#### PREVENTIVE MEASURES

Cannot be prevented at present.

#### EXPECTED OUTCOMES

- Lupus is currently considered incurable. The disease is characterized by remissions and relapses. Life expectancy is reduced, but symptoms can be relieved or controlled for many years.
- Medical literature cites instances of unexplained recovery. Scientific research into causes and treatment continues, so there is hope for increasingly effective treatment and cure.

#### POSSIBLE COMPLICATIONS

- Bacterial or viral pneumonia.
- Impaired kidney function.
- Pericarditis.
- Seizures.
- Hypertension.
- SLE is sometimes associated with other autoimmune disorders such as arthritis, diabetes and hypothyroidism.



### TREATMENT

#### GENERAL MEASURES

- Patients with vague, recurrent symptoms may require long-term observation and repeated testing before a final diagnosis can be made. Laboratory studies of antinuclear antibodies, blood count and sedimentation rate aid in the diagnosis.
- Obtain prompt medical treatment for any infection.
- Don't take any immunizations or drugs without medical advice. Immunizations and some drugs may cause relapses or worsen current symptoms.
- Sunlight sensitivity may occur in some patients. If so, avoid exposure or use protection of hats, sunglasses, sunscreens, long-sleeved clothing.
- Apply heat or ice to relieve joint pain.
- Control the stress in your life. Learn relaxation techniques or obtain counseling if necessary.
- Don't become pregnant without medical advice. Pregnancy may cause problems for the mother and the unborn child.
- Additional information available from the Lupus Foundation of America, 1717 Massachusetts Avenue, NW, Suite 203, Washington, DC 20036, (800) 558-0121.

#### MEDICATIONS

Immunosuppressive, steroid and nonsteroidal anti-inflammatory drugs or antimalarial drugs. These relieve symptoms but don't cure the disease.

#### ACTIVITY

- Remain as active as possible, however, extra rest may be needed.
- Active exercises are encouraged to retain full range-of-motion.
- Physical therapy may be recommended.

#### DIET

If your kidneys or heart are affected, restrict your salt intake. Otherwise, no special diet is necessary.



### NOTIFY OUR OFFICE IF

- You or a family member has symptoms of systemic lupus erythematosus.
- Any of the following occur after diagnosis: Fever of 101° F (38.3° C) or higher, blood in the urine, shortness of breath, chest pain, bloody stool and severe abdominal pain or any illness with fever.
- New, unexplained symptoms develop. Drugs used in treatment may produce side effects.