A LINE ON LIFE

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Lots to Learn about Lupus *

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Did you know that October was "Lupus Awareness Month"? Neither did I, until I received a letter from Terri Jones, the Group Facilitator of the Yuma Lupus Support Group. It seems that lupus gets very little attention from the media. Yet more people have lupus than AIDS, cerebral palsy, multiple sclerosis, sickle cell anemia, and cystic fibrosis combined!

According to a 1994 study in the United States by the **Lupus Foundation of America** (**LFA**), between 1.4 and 2 million people have been diagnosed with lupus. In Yuma alone, at least 500 people have been diagnosed with lupus. At least one student in my classes has lupus.

Lupus is an **autoimmune disease**. This means that the antibodies that protect us from most diseases have gone "haywire." The immune system can no longer tell the difference between disease organisms and the body's own cells. Antibodies are proteins that attack bacteria and viruses. In this case, antibodies are directed at body tissues, causing inflammation, tissue damage and pain. Thousands of Americans die from lupus-related complications, but 80-90% of patients can live a normal lifespan – if they receive adequate treatment. For most of those who develop the disease, lupus is less severe, affecting only a few organs.

There are three types of lupus – discoid, systemic and drug induced. **Discoid lupus** is almost always limited to the skin. Rashes may appear on the face, neck and scalp. A biopsy of the rash identifies discoid lupus by showing abnormalities not present in the skin without the rash.

Systemic lupus is more severe than discoid. It can affect almost any organ system in the body. For some, it only affects the skin and joints. Others may also have problems with their lungs, kidneys, blood or other organs and tissues. Symptoms vary from person to person. In the same person, there may be periods of *remission* – most of the symptoms go away – and "*flare ups*" – when the symptoms are more extreme.

When most people talk about "*lupus*," they are talking about the systemic form of the disease.

Certain prescribed drugs can lead to **drug-induced lupus**. Drugs to treat high blood pressure (hydralazine) or irregular heart rhythms (procainamide) are the most common offenders. However, only about 4% of people who take these drugs develop antibodies that indicate potential lupus. Of these, only extremely few actually develop drug-induced lupus. The symptoms of lupus usually fade when the medication is discontinued.

Lupus is often called a "woman's disease," because women are 10-15 times more likely to have it than men. This may be due to hormonal factors. Symptoms of lupus increase before menstrual periods and/or during pregnancy. Stress is a factor in flare-ups for both men and women. However, the specific hormonal mechanisms are still unknown.

Although lupus does occur in families, no genes have been identified that cause lupus. If your parent or sibling has developed lupus, there is only a 10% chance of it happening to you. Only about 5% of children born to lupus patients will develop the disease. However, if a woman has moderate to severe organ involvement with lupus, she is "at risk" with a pregnancy. A pregnant woman with lupus needs to be closely monitored by medical specialists.

Lupus symptoms mimic many other illnesses. Lupus is even more difficult to diagnose, because symptoms may be vague, or they may come and go. There is no single laboratory test that specifically identifies lupus. If there are many signs, symptoms and positive tests of lupus, it is not hard to diagnose.

The first medical test for the disease was the **lupus erythematosus** (**LE**) **cell test**. Unfortunately, it also is positive for 20% of people with rheumatoid arthritis or other rheumatic conditions. More recently, the **immunoflourescent antinuclear antibody** (**ANA**) **test** has been developed. It identifies virtually all people with systemic lupus. Unfortunately, several conditions also cause a positive reaction to this test, so the ANA test alone is not adequate for a diagnosis.

Although lupus can affect any part of the body, there are symptoms that are more common.

| Symptom | Percentage |
|------------------------------|------------|
| Arthralgia (achy joints) | 95% |
| Fever (over 100 degrees F) | 90% |
| Arthritis (swollen joints) | 90% |
| Prolonged or extreme fatigue | 81% |
| Skin rashes | 74% |
| Anemia | 71% |
| Kidney involvement | 50% |

However, it is common for patients to have vague, seemingly unrelated symptoms. If the patient is a woman, she may be labeled "neurotic." Fortunately, more physicians are becoming aware of lupus to consider this a possible diagnosis. Once diagnosed, there are several options for treatment.

For those who have lupus, help is available.

If you need help, want more information, you can contact the **LFA** at **1-800-30-LUPUS.** At the national level, the number is **1-800-558-0121**.

^{*} Adapted from the pamphlet, "What Is Lupus?" by Robert G. Lahita, M.D., Ph.D., Lupus Foundation of America, 1995.