



# LUPUS AND THE SKIN

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# LUPUS

- ▶ CHRONIC, MULTISYSTEMIC INFLAMMATORY AUTOIMMUNE DISEASE
- ▶ BODY SYSTEMS IT CAN AFFECT:
  - ▶ SKIN
  - ▶ JOINTS
  - ▶ HEART
  - ▶ KIDNEYS
  - ▶ LUNGS
  - ▶ NERVOUS SYSTEM

# WHY DO PEOPLE GET LUPUS

- ▶ Uncertain
  - ▶ Combination of genes, environmental triggers, hormones and certain drugs.
- ▶ Flares can be triggered by anything that triggers your immune system to attack
- ▶ Common triggers:
  - ▶ Sunlight and Ultraviolet (UV) light
  - ▶ Infections/illness
  - ▶ Certain medications
  - ▶ Stress
  - ▶ Surgery or a serious injury

# CUTANEOUS LUPUS

## TWO FORMS:

- SKIN ONLY INVOLVEMENT
  - Chronic lupus erythematosus (Discoid LE, Tumid LE, Lupus Panniculitis)
- SKIN AS PART OF SYSTEMIC DISEASE (SLE)
  - Acute lupus erythematosus
  - Subacute lupus erythematosus

## CUTANEOUS LUPUS

- Widespread rash on the back
- Thick scaly patch on the face
- Sore(s) in the mouth or nose
- Flare-up that looks like sunburn
- More than one type of cutaneous lesion may occur in one person

# CUTANEOUS LUPUS



# CUTANEOUS LUPUS (Discoid LE)

- ▶ Discoid Lupus erythematosus
  - ▶ Head and neck
  - ▶ Most common Chronic form
- ▶ Scarring
- ▶ Joint pains
  - ▶ 5-15% develop SLE
  - ▶ Early manifestation of SLE





# CUTANEOUS LUPUS (Subacute Cutaneous LE)

- ▶ Photosensitive
  - ▶ Lesions confined to sun-exposed skin
- ▶ Discoloration (lighter- more common or darker)
- ▶ Do not scar
- ▶ Certain medications
  - ▶ May or may not clear once medication discontinued
- ▶ 10–15% can over time develop internal disease



# CUTANEOUS LUPUS (Acute LE)

- ▶ Face commonly but can affect hands and all over
  - ▶ Butterfly rash
  - ▶ Sun exposure
  - ▶ No scarring but can leave discoloration
- ▶ Can be accompanied by oral ulcerations
- ▶ Internal disease common





# CUTANEOUS LUPUS (THE OTHERS)



# TREATMENT

- ▶ Sun-protection – Prevention as well as treatment
  - ▶ Sun block/Sun screen
  - ▶ Hats- wide brim, no holes
  - ▶ Sun protective clothing
  - ▶ Sun umbrella
- ▶ Corticosteroids
  - ▶ Topical and systemic

# TREATMENT

- ▶ CALCINEURIN INHIBITORS
  - ▶ TACROLIMUS AND PIMECROLIMUS
- ▶ Use of skin care products that are less likely to irritate skin with lupus
- ▶ Determine whether lupus affects other parts of your body
- ▶ Check skin for signs of skin cancer/transformation to skin cancer

# CUTANEOUS LUPUS

- ▶ More than one type of cutaneous lesion may occur in a given person
- ▶ CAN LOOK LIKE OTHER SKIN CONDITIONS
  - ▶ IMPORTANT TO NOTIFY YOUR RHEUMATOLOGIST
  - ▶ DERMATOLOGIST REFERRAL
    - ▶ CORRECT DIAGNOSIS FOR TREATMENT
      - ▶ SKIN BIOPSIES
      - ▶ OTHER TESTS (DIIRECT IMMUNOFLUORESCENCE, INDIRECT IF,)
      - ▶ BLOOD TESTS
    - ▶ INVOLVEMENT OF OTHER ORGAN SYSTEMS

# CUTANEOUS LUPUS

- ▶ INCREASED RISK OF SKIN CANCER
  - ▶ SKIN LESIONS
    - ▶ DISCOID LESIONS HAVE AN EVEN INCREASED RISK
    - ▶ ORAL DLE LESIONS
    - ▶ SQUAMOUS CELL CARCINOMA
  - ▶ MEDICATIONS TAKEN TO TREAT LUPUS
    - ▶ SUPPRESS THE IMMUNE SYSTEM
- ▶ DISFIGURATION, SCARRING AND DISCOLORATION

# CUTANEOUS LUPUS

- ▶ Make-up (non-irritating)
- ▶ More information: [aad.org](http://aad.org); search term Lupus



# CUTANEOUS LUPUS

- ▶ Develop a sun-protection plan that's right for you
- ▶ Create a treatment plan for your skin
- ▶ Recommend skin care products that are less likely to irritate skin with lupus
- ▶ Teach you how to camouflage lupus on your skin with makeup
- ▶ Help determine whether lupus affects other parts of your body
- ▶ Check your skin for signs of skin cancer



THANK YOU

QUESTIONS