

LUPUS: *The Great Imposter*

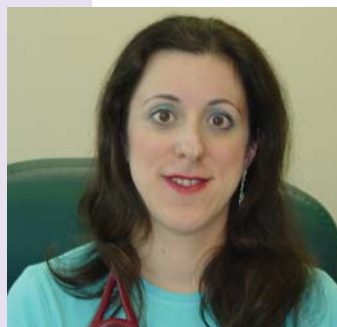
With a host of possible symptoms that are often confused with other disorders, lupus is often referred to as “the great imposter”.

“The symptoms of lupus vary, and most people who have lupus may only experience some of the symptoms, making it hard to diagnose,” said **Rosemarie DeSantis, MD**, a board-certified rheumatologist on the medical staff of SOCH.

Indeed, the most common symptoms, fatigue, fever and muscle and joint pain can lead people to believe they have the flu.

Symptoms of lupus vary widely depending on each case. Most people with lupus do not experience all of the following symptoms. This list serves to alert people to clues that might indicate the presence of lupus in an undiagnosed person.

- Achy or swollen joints
- Persistent fever over 100 degrees
- Prolonged, extreme fatigue
- Skin rashes, including a butterfly shaped rash across the cheeks and nose
- Pain in the chest on deep breathing
- Anemia
- Excessive protein in the urine
- Sensitivity to sun or ultraviolet light
- Hair loss
- Abnormal blood clotting
- Fingers turning white and/or blue in the cold
- Seizures
- Mouth or nose ulcers lasting longer than two weeks



*Rosemarie DeSantis, MD
a board-certified rheumatologist
on the medical staff of SOCH*

According to Dr. DeSantis, lupus is a chronic, autoimmune disease in which the immune system, for unknown reasons, begins to attack healthy tissue. Lupus can occur at any age, and in both genders; however, **nine out of 10 people with lupus are women**. In addition, the disease is most often diagnosed between the ages of 15 and 45.

“Our immune system can be equated with an elaborate security force that prevents foreign invaders from attacking the body,” explained Dr. DeSantis. “The cells of the immune system are trained to spot things that don’t belong inside the body, and eliminate the intruder. When a person has lupus, the immune system loses its ability to tell the difference between foreign invaders and healthy tissue and cells.”

According to Dr. DeSantis, to diagnose lupus, a physician will take into account the frequency and severity of a patient’s symptoms, as well as order blood tests, urine tests, and certain imaging studies.

Although there is no cure for lupus, with close follow-up and treatment, the majority of the people with the disease can expect to live a normal life span. The disease can vary in its intensity and degree, with some patients only

experiencing mild, occasional symptoms, while others have moderate or severe disease. Most people with lupus have one thing in common, however, and that’s the tendency of the disease to get decidedly worse in episodes called flares and then to improve or even disappear completely for a time.

Medications can ease the symptoms and reduce the complications of lupus. These can include anti-inflammatory drugs, corticosteroids and immunosuppressive medications. “Each type of medication carries benefits and risks,” cautioned Dr. DeSantis. “Patients should work with their physician to find the most appropriate treatment.”

In addition to medication, there are steps that patients can take to help prevent and cope with the disease. Dr. DeSantis encourages people with lupus to learn to recognize the warning signs of a flare, which include pain, rash, fever, fatigue, abdominal discomfort, headache and dizziness. She recommends patients get adequate rest, stay out of the sun, wear protective clothing and sunscreen when outdoors, consider relaxation techniques such as yoga or meditation to help reduce stress, get regular exercise, don’t smoke, limit alcohol intake and eat a healthy, well-balanced diet.

For more information about *lupus*, or referral to a *physician* at SOCH, call **SOCHConnect** at **609-978-3400**.

