

# INITIAL PRESENTATION OF SYSTEMIC LUPUS ERYTHEMATOSUS IN 286 PATIENTS IN SOUTHERN BRAZIL

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In systemic lupus erythematosus (SLE) involvement of almost every body system is possible.<sup>1</sup> Age, sex and genetic background are associated with the presence of different patterns of disease. The clinical presentation that dominates during the first few years of disease tends to prevail subsequently and in this manner influence patient's prognosis.<sup>1</sup>

In pediatric SLE the most common forms of presentation are skin rashes, arthritis, fever and renal involvement.<sup>2</sup> Norris et al,<sup>3</sup> studying 101 children with lupus at the Mayo Clinic, found that the presentation in children is similar to that of adult patients. A previous Brazilian study has shown that alopecia, seizures, gastrointestinal involvement are more common in children at early disease and that kidney involvement is more common than in adults during the disease course.<sup>4</sup> Another study showed that not only is renal disease more common in children but that they have higher lupus activity at presentation and during the whole disease course.<sup>5</sup>

In late onset lupus (over 50 years), clinical presentation is variable according to the studied series; older patients have a slower disease onset and the diagnosis is not as easy to make.<sup>6</sup> Boddaert et al,<sup>7</sup> studying 47 SLE patients with late onset, found that the most common presenting manifestations were polyarthritis, serositis and malar rash. The same author when comparing the main clinical features during the disease evolution found that older patients have less renal disease, arthritis and cutaneous rashes than the younger ones.

Gender also affects the disease expression: a higher frequency of renal disease, malar rash and photosensitivity has been noted in males.<sup>8</sup> Other authors found that alopecia and Raynaud were less frequent in male patients although major organ involvement was similar in males and females.<sup>9</sup>

We studied retrospectively the clinical presentation of 286 systemic lupus patients from South Bra-

zil with at least 4 ACR criteria for this disease, accompanied for 5 years in our Rheumatology Unit. The sample had 12 (4.1%) males and 274 (95.8%) females with disease onset from 5 to 73 years (mean  $30.3 \pm 11.9$  years).

Six (50%) male had nephritis as initial manifestation compared to 54 (19%) of females ( $p=0.011$ ). According to age of onset we found that patients with onset until 16 years had more nephritis ( $p=0.018$ ) and a trend to have less skin manifestations ( $p=0.08$ ) than adults. Patients older than 16 years had more hematological disturbance as initial finding ( $p=0.05$ ) and this form of presentation was even more common in patients older than 50 years ( $p=0.017$ ). No difference was found in other manifestations such as musculoskeletal ( $p=0.14$ ), serositis ( $p=0.54$ ) and central nervous system ( $p=0.48$ ).

We conclude that the most common manifestations in lupus patients from southern Brazil are musculoskeletal and cutaneous. In this population nephritis was more frequent at presentation in children and adult patients had more hematological manifestation.

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