

Symptoms and Diagnosis of Chilblain Lupus

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DESCRIPTION

Lupus is a type of autoimmune disease where your immune system attacks healthy cells. Chilblain lupus is known as one of the symptoms of lupus. People suffering from chilblain lupus experience painful red or purple lesions and discolored regions of skin. Cold temperatures cause these little sores (Chilblains) to form or intensify. The term "chilblain" is derived from the phrases cold and sore. Chilblains could be caused by lupus, although not all chilblains are caused by lupus. You are more likely to have chilblains if you: Inadequate blood circulation. Wearing tight clothing affects blood circulation; people living in regions that are humid and cold are most likely affected. Chilblain lupus could affect anyone, but it is most frequent in adults. Chilblain lupus is common among people who live in cold, damp climates. Some factors can raise a person's risk of developing chilblain lupus, such as: people who suffer from a fatal eating disorder known as Anorexia nervosa, Intestinal lymphoma are an uncommon kind of lymphoma that begins in the small intestine, Pregnancy. Even though chilblain lupus is uncommon, healthcare providers are aware that it is underreported. Because many patients do not seek medical help, clinicians are unaware of the extent of the problem. Only 70 cases of chilblain lupus are reported according to the research.

CAUSES OF CHILBLAIN LUPUS

The pathophysiology of chilblain Lupus in rare cases is uncertain. A cold stimulus is thought to cause vasoconstriction or micro vascular damage, which causes blockage of the capillary bed and decreased circulation, resulting in skin hyper viscosity and stasis, which is compounded by low blood temperature. Immunological abnormalities may worsen these pathophysiological changes.

Mutations in TREX1 or SAMHD1 genes may be a reason for the cause of chilblain lupus. These mutations can be found in people who have a family history of chilblain Lupus and also who develop the disease as a kid. The gene TREX1 is located on chromosome 3, which encodes a nuclear protein. It plays a vital role in DNA repair and proofreading for DNA polymerase. SAMHD1 is a gene that plays a vital role in the innate immune

response. It is located on chromosome 20 which is used to encode a host restriction nuclease.

SYMPTOMS OF CHILBLAIN LUPUS

Chilblain lupus develops skin patches or lesions that are red or purple. These lesions usually occur on your fingers, heels, soles of your feet. Sores on the palms of your hands, knees, nose, and ears are less prevalent. The lesions usually intensify in cold or damp conditions.

Symptoms of chilblain may also include:

- Blisters or ulcers are open wounds produced by lack of blood circulation.
- Depigmentation is the process through which regions of skin lighten or lose color.
- Skin thickening is caused by hyperkeratosis.
- Raynaud's phenomenon is characterized by transient blood restriction in the fingers and toes.

Chilblain lupus skin lesions can get infectious if not treated. People with chilblain lupus are more likely to get bacterial skin infections (cellulitis).

DIAGNOSIS OF CHILBLAIN LUPUS

Dermatologists can treat chilblain lupus. Dermatologists typically employ a test known as a skin biopsy. During a skin biopsy, the dermatologist takes a small sample of skin. The doctor sends this sample to a laboratory, where it is examined under a microscope by specialists. Skin examination under a microscope will reveal whether chilblain lupus or another ailment is the cause of producing skin ulcers. Patients with moderate chilblain lupus symptoms should avoid exposure to cold weather. Patients should stop smoking because it narrows blood vessels and exacerbates chilblain lupus symptoms.

Medications that are commonly used include:

- Antibiotics such as dicloxacillin or erythromycin treat bacterial skin infections.
- Antimalarial drugs hydroxychloroquine (Plaquenil) help with weariness, inflammation, and joint discomfort.

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- Calcineurin inhibitors like tacrolimus and mycophenolate mofetil are used to suppress the immune system's response to inflammation.
- Calcium channel blockers like nifedipine (Adalat) help your blood vessels open up. Fluocinolone acetonide (Synalar) and hydrocortisone butyrate (Locoid) are steroid ointments that reduce swelling and irritation.
- Prednisone (Deltasone) and other systemic steroids are swallowable medications that decrease inflammation and edema.

In rare cases, your doctor may advise you to have surgery to treat chilblain lupus. The physician may remove chilblain lesions surgically and perform a skin transplant. During a skin graft, your physician moves a portion of healthy skin from one place of the body to another in a safe manner.

CONCLUSION

Chilblain lupus is a chronic illness. Many people manage their symptoms with therapy and sufficient cold protection. Protecting oneself from cold weather might help you avoid chilblain lupus flare-ups. Exercise regularly to increase blood flow. Ensure that your house and office are properly insulated and heated. Several times a day, soak your hands or feet in warm water. Warm your cold hands or feet slowly to increase blood flow. When you're in a cold climate wear thick wool socks, gloves, and warm shoes. With proper treatment, symptoms can be managed.