

## UNDER OPEN ACCESS

## Examining Lupus as an Autoimmune Disease

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## DESCRIPTION

Lupus, or Systemic Lupus Erythematosus (SLE), is one of the most complex and elusive autoimmune diseases. It affects various systems and organs in the body and can present with an array of symptoms that often mimic those of other conditions, making it challenging to diagnose. Furthermore, lupus is a chronic condition, and its symptoms can fluctuate over time, further complicating the management and understanding of the disease.

Autoimmunity is a multifaceted phenomenon that is not yet fully understood. While some degree of autoimmunity is a normal part of immune system function, as it helps the body maintain self-tolerance, an overactive or misdirected immune response can lead to autoimmune diseases. Genetics play a crucial role in the development of lupus. Studies have shown that individuals with a family history of lupus are at a higher risk of developing the disease. However, it is not solely a genetic disorder; environmental factors also play a substantial role. These environmental triggers can include exposure to sunlight, infections, and certain medications, among others.

Lupus predominantly affects women, with nine out of ten patients being female. Hormonal factors, especially the influence of estrogen, may contribute to this gender disparity. This is evidenced by the fact that the onset and course of lupus can be influenced by pregnancy and hormonal changes associated with it. Researchers have identified various antibodies and autoantigens that are commonly associated with lupus, such as Anti-Nuclear Antibodies (ANA), Anti-Double-Stranded DNA (anti-dsDNA) Antibodies, and Anti-Smith (anti-Sm) Antibodies. These antibodies can form immune complexes and deposit in different tissues, causing inflammation and damage.

Lupus is known for its wide array of symptoms, which can vary greatly from one individual to another. This variability, along with the overlap of lupus symptoms with those of other diseases, often leads to delay or misdiagnosis. Some of the most common symptoms of lupus include Skin rashes, often triggered or worsened by sunlight, known as the "butterfly rash." Joint pain and inflammation, which can resemble rheumatoid arthritis. Fatigue and malaise, which can be severe and debilitating. Fever and weight loss. Kidney problems, ranging from mild proteinuria to severe kidney disease. Neurological symptoms, such as seizures, headaches, and cognitive difficulties. Cardiovascular issues, including pericarditis and atherosclerosis. Hematologic abnormalities, like anemia and an increased risk of blood clots. Gastrointestinal problems, such as abdominal pain and gastrointestinal bleeding.

The diagnosis of lupus is not direct due to the disease's complexity and the overlap of its symptoms with other conditions. Healthcare providers typically rely on a combination of clinical assessment, laboratory tests, and a careful review of the patient's medical history. One of the key diagnostic criteria for lupus is the presence of Anti-Nuclear Antibodies (ANA) in the blood, which are found in the majority of lupus patients. However, ANA can also be detected in other autoimmune diseases and even in some healthy individuals, so a positive ANA test alone is not sufficient for a lupus diagnosis. Additional antibody tests, like anti-dsDNA and anti-Sm antibodies, can further support the diagnosis when they are present.

In addition to antibody tests, healthcare providers may use other diagnostic tools such as blood counts, kidney function tests, and imaging studies to assess the extent of organ involvement. A skin or kidney biopsy may be necessary in some cases to confirm the diagnosis. The diagnostic process may take some time and often involves multiple visits to healthcare professionals. The complexity of lupus and its variable presentation can lead to misdiagnosis or a delayed diagnosis, which can be opposing for patients and may result in inadequate management of the disease.

There is currently no cure for lupus, but advances in research and medical care have led to improved management of the disease. The treatment of lupus typically involves a multidisciplinary approach, with various healthcare specialists collaborating to address the diverse symptoms and complications of the disease. The use of medications is a cornerstone of lupus management. Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) can help with pain and inflammation, while immunosuppressive drugs are often prescribed to control the overactive immune response. Corticosteroids can also be used to reduce inflammation,

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but their long-term use is associated with various side effects. Disease-Modifying Antirheumatic Drugs (DMARDs) are drugs, such as hydroxychloroquine and methotrexate, can help manage symptoms and prevent flares. They are often used for patients with mild to moderate disease activity. Biologic therapies include biologic agents like belimumab are used to specifically target the immune system's abnormalities seen in lupus. Many lupus patients require medications and interventions to manage pain, fatigue, and other symptoms, which can vary from patient to patient. Patients are often advised to make lifestyle changes to reduce the impact of lupus on their lives. This may include avoiding sun exposure, maintaining a healthy diet, exercising, and getting enough rest. Routine check-ups and monitoring of lupus activity are essential to adjust the treatment plan as needed. Dealing with a chronic condition like lupus can be emotionally challenging. Support from mental health professionals

and support groups can be invaluable for patients. Research into lupus continues to provide new insights into the disease's underlying mechanisms and potential treatment approaches. Tailoring treatment plans to individual patients based on their specific genetic and immunological profiles could lead to more effective and targeted therapies. In addition to medical management, lifestyle adjustments are often necessary. These can include dietary changes, managing stress, getting adequate rest, and protecting the skin from sun exposure. Patients should also be proactive in seeking emotional support from therapists or support groups, as living with a chronic disease can take a toll on mental health. Lupus remains a mysterious and complex autoimmune disease, presenting a myriad of challenges to both patients and healthcare providers. With a genetic and environmental basis and an intricate interplay of immunological factors, it exemplifies the intricate nature of autoimmunity.