HOW IS THE PROFILE OF PATIENTS WITH THE UNUSUAL COMBINATIONS OF SYSTEMIC SCLEROSIS AND SYSTEMIC LUPUS ERYTHEMATOSUS?

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BACKGROUND

Overlap syndrome (OS) systemic sclerosis (SSc) and systemic lupus erythematosus (SLE) is a condition not yet clearly characterized from a clinical and epidemiological point of view, mainly due to its rarity. Given this, this work aims to obtain clinical and epidemiological profile in patients with OS of SSc-SLE from a rheumatology outpatient clinic.

METHODS

This is a retrospective, descriptive study of medical records analysis, from which demographic, clinical, laboratory and imaging data were collected. Patients with SSc and SLE were included according to the ACR/EULAR classification criteria. Those under 18 years old or with other types of OS were excluded.

RESULTS

Nineteen patients were identified in records from 30 years. Epidemiological profile showed that 84.2% of them were females; with median age of 46 years; 50% of them were Caucasians, 73.7% were nonsmokers and the limited form of SSc was present in 47% of them. The prevalence of Raynaud's phenomena was 100%, pitting scars in 57.9%, gastroesophageal dysmotility in 84.2%; pulmonary hypertension in 57.9% pulmonary fibrosis in 52.6%. Photosensitivity was found in 84.2%, oral ulcers in 52.6%, skin vasculitis in 42.1%, glomerulonephritis in 15.8%. Arthralgias were found in 100% but arthritis in 68.4%. Sicca symptoms were identified in 63.2% but the diagnosis of secondary Sjögren in only 31.6%. No differences were found in the clinical profile according to gender (all $p = ns$). Smoking also did not affected the clinical profile except by discoid lesions and pleuritis that were less common in smokers ($p = 0.01$ and 0.03 respectively). From the serological point of view: antinuclear antibodies (ANAs) were present in 100% of them; the speckled pattern was the most found (36.8%). Anti-Sm was found in 57.8%, anti-dsDNA in 36.8%, anti-RNP in low titers in 68.4, anti-Ro in 57.8% and anti-La in 42.1%, anticentromere in 30% and anti-Scl-70 in 17.6%.

CONCLUSION

The profile found of OS SSc-SLE in this service was female, young, Caucasian, nonsmoker and with limited SSc. Gastroesophageal, vascular, pulmonary and cutaneous affections were more common clinical findings. In laboratory findings prevailed speckled ANAs; anti-RNP in low titers; anti-Ro and anti-Sm. Never having smoked was found to be protective for serositis and discoid lesions, as well as significant associations of anti-Scl-70 with discoid lupus, anti-La with Sjögren's syndrome and anti-DNA with digital ulcers were found.

KEYWORDS

Lupus erythematosus, Systemic scleroderma, Systemic collagen diseases.