



Lupus and Women

What is lupus?

Lupus is a chronic autoimmune disease that causes the immune system to mistakenly target healthy cells, tissues, and organs. This results in pain and inflammation in the body and can lead to permanent damage. Lupus symptoms vary from person to person and can range from mild to severe.

There are four main types of lupus:

- **Systemic lupus erythematosus (SLE)** is the most common and most serious type of lupus. SLE can affect the brain, lungs, kidneys, joints, skin, and blood vessels.
- **Neonatal lupus** can affect some fetuses who are exposed to lupus in the womb during pregnancy.
- **Cutaneous lupus erythematosus (CLE)** causes a rash or swelling on the skin, usually where the skin is exposed to the sun. These rashes can lead to permanent scarring in some cases.
- **Drug-induced lupus** is caused by a reaction to certain medications.

What causes lupus?

The exact causes of lupus are unknown, but it is not contagious. Research suggests that there are several risk factors, including genetics, hormones, environmental triggers, and immune system function. Certain genes may increase risk, though most people with lupus do not have a family history. Since the disease affects more women, researchers believe that estrogen and other female hormones may play a role, with symptoms sometimes worsening during menstrual periods or pregnancy. Environmental factors such as sunlight, stress, smoking, certain medicines, and viruses may also trigger lupus symptoms.

Who is affected by lupus?

Anyone can get lupus, but it is much more common in women than in men. About 9 out of 10 people diagnosed with lupus are women ages 15 to 44. Lupus can also raise a woman's risk of other serious health conditions. These include heart disease, osteoporosis, and kidney disease.



What are the symptoms of lupus?

Lupus can have different symptoms in different people and may change over time. Some people with lupus are prone to flares—which means symptoms may be mild sometimes and other times severe, requiring medical attention. Lupus symptoms may include fever, hair loss, muscle and joint pain, mouth sores, prolonged or extreme fatigue.

To help control lupus symptoms, see your health care provider regularly and learn to recognize the triggers and early signs of flares so you can prevent or make them less severe.

Follow your treatment plan, manage stress, and practice good self-care. Protect yourself from UV light by limiting time in the sun and always wear sunscreen. Maintaining a healthy lifestyle with proper nutrition, regular exercise, and rest is also important.

How is lupus diagnosed and treated?

Lupus can be hard to diagnose because it has many symptoms that come and go. Lupus symptoms may also be similar to symptoms of other disorders or diseases. There is no one test to diagnose lupus. Your health care provider may ask about your medical history and your family's medical history, perform a complete medical exam, do blood tests, take urine samples and x-rays, and do a biopsy of the skin or kidney before diagnosing lupus. While there is no cure or single therapy for lupus that targets all manifestations for lupus, there are several FDA approved therapies available specific for lupus. **Your health care provider may prescribe medications to help treat your symptoms of lupus. These treatments will depend on the type of lupus you have. Some types of medications include:**

- Anti-inflammatory drugs
- Antimalarials
- Corticosteroids
- Immunosuppressants
- B-lymphocyte stimulator (BlyS) protein inhibitor
- Inhibitor to the type I interferon receptor

Lupus and pregnancy

If you have lupus and plan to become pregnant, you should talk with your health care provider and start planning for pregnancy early. In general, lupus should be under control for six months before you become pregnant. Being pregnant while your lupus is active can cause miscarriage, stillbirth, neonatal lupus, and other serious health problems like **preeclampsia**. Also, pregnancy is very risky for certain groups of women with lupus, including those with high blood pressure, a history of preeclampsia, or lung, heart, or kidney problems.

Pregnancy can also cause your lupus to flare. Flares may require medical attention or an early delivery. Neonatal lupus can happen when a developing fetus is exposed to lupus during pregnancy. While neonatal lupus typically goes away by the time the baby is six months old, it can cause serious problems in the newborn with the skin, liver, blood, and heart.

Breastfeeding is possible for women with lupus. However, some medicines that help control lupus can pass through breastmilk to your baby. Talk with your health care provider about your medicines before you begin breastfeeding.

If you have any lupus symptoms or are concerned that you may have lupus, talk with your health care provider about medical treatment options and their risks and benefits. Your provider can answer your questions and together you can decide which treatment is right for you.

This information was developed by the **FDA Office of Women's Health**. It is for educational purposes, not all inclusive and should not be used in place of talking with your health care provider.

To learn more, go to: www.fda.gov/womens

