





PREVALENCE OF CUTANEOUS LUPUS ERYTHEMATOSUS IN CEARA, BRAZIL

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BACKGROUND

Lupus Erythematosus is an autoimmune disease that affects mainly the skin, once prevalence of cutaneous manifestations is higher than 70%. Cutaneous Lupus Erythematosus (CLE) can be divided in three subtypes, according to the spectrum of its lesions: Acute Cutaneous Lupus Erythematosus (ACLE), Subagute Cutaneous Lupus Erythematosus (SCLE) and Chronic Cutaneous Lupus Erythematosus (CCLE). CCLE still can have subtypes: Tumid Lupus Erythematosus (TLE), which presents itself as mixed lesions with urticaria and erythema, and Discoid Lupus Erythematosus (DLE), which presents itself as atrofic lesions. There are very few studies about epidemiology of these forms of cutaneous lupus in Brazil. It is known that CLE is more common in young females, but its occurrence varies according to subtype and region. The aim of this study is describe its epidemiology in Brazil, using a tertiary center located in Fortaleza, Ceará, as data-base.

MATERIALS AND METHODS

It was adopted a retrospective design using a quantitative approach, based on medical records of patients of a tertiary dermatologic center in Fortaleza, Ceará, from january to december, 2015 A total of 19.576 patients were seen in that period. We selected patients who were diagnosed as "Lúpus", "Lúpus Bolhoso", "Lúpus Túmido", "Lúpus Subagudo", "Lúpus Discoide", "LES", "LED" e "LESA".

RESULTS

Considering the total number of patients treated in the period (19.576 patients), 320 patients were diagnosed with lupus, representing a prevalence of 1,63%. Of these, 57,8% were diagnosed with DLE, 3,7% with SCLE, 7.5% with TLE and 4% with ACLE. 27% of the patients did not have their types specified in the records. Considering only the specified types, 79,2% were diagnosed with DLE, 5,1% with SCLE, 10,2% with TLE and 5,5% with ACLE. 78,75% of the total patients were female and the mean age was 40.66 years old. DLE patients were 85.4% female, and mean age was 48.23 years; SCLE patients were 73.7% female and its main age was 46.4 years; ACLE patients were 77,4% female and the median age was 36.2 years; TLE patients were 73.7% female and mean age was 44.1 years.

CONCLUSION

Although CLE is very common in the disease spectrum, the brazilian literature lacks studies of its local epidemiology, making it hard to associate epidemiologic factors, ages and associated diseases. More studies are necessary, so we can compare and develop actions that can identify people at risk and improve treatments and their quality of life.