



PREVALENCE OF NEUROLOGICAL MANIFESTATIONS OF SYSTEMIC LUPUS ERYTHEMATOSUS IN PATIENTS FOLLOWED UP AT AN UNIVERSITY HOSPITAL IN AMAZONAS

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BACKGROUND

Systemic lupus erythematosus (SLE) is a chronic autoimmune inflammatory disease. Its pathophysiology includes the production of autoantibodies and the hyperreactivity of T and B cells, which generates repercussions on various organs such as skin, mucosa, joints, kidneys, serous membranes and central and peripheral nervous system. The American College of Rheumatology (ACR) defined in 2012 the diagnostic criteria of SLE that are currently used, among them the neurological manifestations that include: convulsion, psychosis, myelitis, multiple mononeuritis, central or peripheral neuropathy and acute mental confusion. In view of this scenario, this study aims to analyze the prevalence of neurological manifestations in patients diagnosed with SLE who attend the rheumatology service of a university hospital in Manaus, in order to obtain the local standard of these findings.

MATERIALS AND METHODS

This was a retrospective, observational, cross-sectional and descriptive study where the medical records of patients with clinical and laboratory diagnosis of SLE treated at the referral hospital were analyzed. After approval of the project by the Research Ethics Committee, the following data were collected: age, gender and presence of neurological manifestations defined by the ACR.

RESULTS

The records of 595 patients with SLE of the service were seen, of which 13% presented neurological criteria (113), of which 105 were studied in more detail. According to characteristic epidemiology, the mean age is 38 years (young adults), predominantly in women (92.4%). As for the neurological manifestations, the most frequent is Convulsion (61%), followed by Psychosis (31.4%), Myelitis, Multiple Mononeuritis, Central or Peripheral Neuropathy and Mental Confusion, which together constitute 10.48%. In addition, other neurological comorbidities have also been reported in patients with these criteria, being the following: Stroke (9.52%) and Headache (4.76%).

CONCLUSION

Thus, neurological impairment is present in a significant number of patients with SLE, and the epidemiological distribution of these conditions is in accordance with similar data reported in the literature, with a more frequent occurrence of seizures and psychosis.