



PREVALENCE OF THYROID AUTOIMMUNE DISEASES IN PATIENTS WITH SYSTEMIC LUPUS ERYTHEMATOSUS ATTENDED AT A REFERRAL UNIVERSITY HOSPITAL

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BACKGROUND

Autoimmune diseases are clinical syndromes characterized by changes in the normal immune response, with loss of tolerance to their own antigens. Systemic Lupus Erythematosus (SLE) is a systemic autoimmune disease in which autoantibodies are produced, associated with hyperactivity of T and B lymphocytes. SLE triggers various clinical manifestations, ranging from skin and mucosal lesions to damage to the central nervous system and renal system. Thyroid autoimmune diseases mainly include Hashimoto's Thyroiditis and Graves's Disease, and are associated with numerous rheumatologic disorders, especially with SLE. This association seems to be related to specific alleles of the Human Leukocyte Antigen (HLA DR2, DR3 and DR8), in addition to the common etiopathogenesis, which is autoimmunity. This study aims to identify the prevalence of thyroid disease in patients with SLE treated by the Rheumatology department of a university hospital in Amazonas.

MATERIALS AND METHODS

A retrospective, observational, cross - sectional and descriptive study was carried out on the charts of patients with SLE in follow - up at the rheumatology department of a university hospital located in Manaus - Amazonas. The informations collected were: color, sex, age, duration of disease, criteria for diagnosis of lupus, diagnosis of thyroid diseases, thyroid function tests and history of drug or surgical treatment for thyroid disease. This study was approved by the Research Ethics Committee.

RESULTS

A total of 396 medical records were analyzed. Of these, 29 patients had diagnosed thyroid diseases (7.32%): 28 cases of hypothyroidism and 1 case of hyperthyroidism, all of them female. The mean age in this group was 48.68 years old and the mean evolution time was 16.65 years. Most "non-white" color with 65.5% and 34.5% white. The most prevalent diagnostic criteria for SLE in these patients were: Photosensitivity (96.5%), Arthritis (96.5%), Rash Malar (75.9%), Haematological (65.5%) and renal involvement (55,2%). One interesting fact was that, considering all patients with SLE, only 56.6% had thyroid function tests (TSH, T4L or Thyroid Ultrasonography).

CONCLUSION

Therefore, a frequency of coexistence of autoimmune diseases of the thyroid and SLE observed is significant, a fact that must be considered in the management of these patients, because this association may have different clinical outcomes. In addition, it is important to do the screening thyroid disease in these patients more efficiently, so that there is early diagnosis and preparation of appropriate therapy, ensuring the best prognosis to the patient.