

Lupus

What is lupus?

This autoimmune disease is not contagious, but it is chronic, with symptoms ranging from mild to life-threatening. Lupus occurs when the immune system becomes overactive and produces a type of protein called autoantibodies that attack and destroy healthy tissue. This attack causes inflammation, pain and damage to various parts of the body.

According to the [Lupus Foundation of America](#), 1.5 million Americans, have one of the four forms of lupus: systemic lupus, cutaneous lupus, drug-induced lupus and neonatal lupus.

Systemic lupus accounts for approximately 70 percent of all cases of lupus. In approximately half of these cases, a major organ or tissue in the body, such as the heart, lungs, kidneys, or brain will be affected.

Another type is cutaneous lupus, which it causes skin rashes and lesions. Drug-induced lupus is a lupus-like condition caused by high doses of certain medications. It's more common among men because they are prescribed these drugs more often.

Finally, there is neonatal lupus, a rare form that appears in the infants of women with lupus; specifically, the mother's antibodies affect the baby while in the womb. These children may develop skin rashes, liver problems or low blood cell counts. But after six months, these symptoms completely disappear with no lasting effects.

Who gets lupus?

Lupus often runs in families, but the condition can also develop in people who have no family history of the illness. The condition affects mostly women, ages 15 to 44, but men, teens and young children can also get lupus.

Lupus is two to three times more prevalent among women of color—African Americans, Hispanics/Latinos, Asians, Native Americans, Alaska Natives, Native Hawaiians and other Pacific Islanders—than among Caucasian women.

Among population groups, the chances of getting lupus are higher for African Americans. Black women are three times more likely than Caucasian women to have lupus. In addition, African-American women develop more severe symptoms of the condition.

What are the symptoms of lupus?

Lupus symptoms wax and wane, and different signs can appear as the disease progresses. The most common symptoms of lupus are the same for females and males. They include:

- Extreme fatigue (tiredness)
- Headaches
- Painful or swollen joints
- Fever
- Anemia (low numbers of red blood cells or hemoglobin, or low total blood volume)
- Swelling (edema) in feet, legs, hands and/or around eyes
- Pain in chest during deep breathing (pleurisy)
- A butterfly-shaped rash across cheeks and nose
- Sun- or light-sensitivity (photosensitivity)
- Hair loss
- Abnormal blood clotting
- Fingers turning white and/or blue when cold (a.k.a. Raynaud's phenomenon)
- Mouth or nose ulcers

It's difficult to diagnose lupus because many of these symptoms occur with other illnesses, such as rheumatoid arthritis, blood disorders, fibromyalgia, diabetes, thyroid problems, Lyme disease and a variety of heart, lung, muscle and bone diseases.

What are the risk factors for lupus?

Main risk factors include being female, black, between ages 15 and 44 and having a family history of lupus.

Taking certain medicines is another risk factor; this includes ethotoin (brand name Peganone) and phenytoin (brand names Dilantin, Phenytek, Phenytoin Sodium and Prompt), used to prevent and control seizures; chlorpromazine (Thorazine), used to treat dementia-related behavioral problems; d-penicillamine (Artamin, Artin and Cilamin), used to treat severe rheumatoid arthritis; oral hydralazine (Apresoline), used to treat high blood pressure; interferon alfa (Alferon, Intron and Roferon), a cancer medication; isoniazid (Niazid), used to treat tuberculosis infections; methyldopa (Aldomet), a high blood pressure med; minocycline (Dynacin and Minocin), an antibiotic used to treat a variety of infections, including acne; and procainamide (Procanbid and Pronestyl), used to treat serious cases of abnormally fast heartbeat; and drugs to inhibit chemical substances (called tumor necrosis factor-alpha) that trigger inflammation in autoimmune disease and inflammatory conditions such as rheumatoid arthritis and inflammatory bowel disease.

What are the tests for lupus?

Current lupus testing includes routine blood tests, urine tests, antibody (a protein found in blood or body fluid) tests, blood clotting time tests and tissue biopsies involving the removal of a small bit of body tissue that the doctor examines under a microscope.

How is lupus treated?

Although there is currently no cure for lupus, doctors can tailor treatments, including medications, to individual patients. Depending on whether a patient's lupus is mild or severe, meds can range from acetaminophen or nonsteroidal anti-inflammatories (NSAIDs) or corticosteroids if NSAIDs don't work well-for fever and mild joint or muscle pains; antimalarial medicines for skin rashes, fatigue and joint or muscle pains; and immune system meds (for more severe lupus cases).

In addition, lifestyle changes can help treat lupus. Regular exercise, lupus education and self-care, smoking cessation, a healthy, balanced diet and a support system of family, friends and health professionals are key to controlling the frequency and severity of lupus symptom flare-ups.

Other lifestyle modifications target stress reduction-for example, relaxation therapies such as massage, yoga and meditation.

Last Reviewed: February 21, 2019

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