AUTOIMMUNE CONNECTIVE TISSUE DISEASES

# LUPUS PANNICULITS: EXPERIENCE FROM A THIRD-LEVEL HOSPITAL

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Background: Lupus panniculitis (LP) represents 1-3% of cutaneous lupus cases. Approximately 10% of the cases occur in the context of systemic lupus erythematosus (SLE). The objective of this study was to investigate the clinical and immunological features of Mexican-mestizo LP patients.

Observation: We performed a retrospective analysis of all the LP cases confirmed by histopathology from 1989 to 2016 in a third-level care center in Mexico City. We found 14 cases, 12 of them were female with a median age of 33 years (range 17-54 years). The most affected body sites were: arms (n=9), trunk (n=8) and legs (n=6). The most common clinical findings, either alone or simultaneous, were subcutaneous nodules (n=5), atrophic plaques (n=5), indurated plaque (n=5), erythema (n=5), and hyperpigmentation (n=5). Pain was present in 6 cases. Six patients had history or simultaneous discoid lupus. The mean time of onset to diagnosis was 18 months (range 1.5-84 months). Six patients had a previous diagnosis of SLE and two were diagnosed after LP diagnosis; six patients presented other autoimmune diseases. Eight cases had elevated anti-nuclear titers (≥1:80). Half of the patients received systemic therapy, 2 cases topical treatment and 5 cases combined treatment. Eight patients presented recurrences (1-9).

Key message: In our series 8 patients has a concomitant diagnosis of SLE, higher than previous reports in the literature. It is mandatory to exclude SLE when a case of LP is confirmed, particularly in Mexican-mestizo population.