



AUTOIMMUNE CONNECTIVE TISSUE DISEASES

IMPACT OF CLE AND CONCOMITANT DISEASE ON QUALITY OF LIFE

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The impact of cutaneous lupus erythematosus (CLE) on the daily lives of patients is wide-ranging and significant. Patients make major lifestyle modifications to avoid disease flares and mask chronic manifestations of their skin disease. The psychosocial effects of CLE impact patients' interactions with friends and family. Symptoms such as itching and burning can limit functioning. To capture these multiple aspects of quality of life, clinical trials are increasingly using questionnaires including the SKINDEX-29, Short Form (SF)-36, and Dermatology Life Quality Index as endpoints for therapeutic efficacy. By providing numeric values that assess impact on quality of life, these questionnaires can help raise awareness of the severity of CLE to heighten public education and research funding. They also can help convince insurance companies to cover non-formulary medications that would benefit patients. At University of Texas Southwestern Medical Center, we have shown that SKINDEX-29 scores in our patients with CLE strongly correlate with Cutaneous Lupus Activity and Severity Index scores, and are comparable in severity to other conditions such as dermatomyositis and vulvodynia. Factors such as female gender and low socioeconomic status predispose CLE patients to reporting worse quality of life. Using SF-36 scores, we and Dr. Victoria Werth's group at University of Pennsylvania showed that quality of life in patients with CLE was worse than those having hypertension, diabetes, and myocardial infarction. Our characterization of quality of life in patients with CLE supports the notion that the disease's impact on patients cannot be understated. Moreover, it underscores the need for novel therapeutics to meet patients' expectations in significantly improving their daily lives.

