

## **2008 Was a Year of Progress and Hope for a Better Quality of Life for 1.5 Million Americans Affected by Lupus**

The Lupus Foundation of America is pleased to report continuing progress was achieved in 2008 in efforts to combat lupus, a chronic autoimmune disease which affects an estimated 1.5 million Americans and at least five million people worldwide. Teams of researchers announced important findings which provided clues to the underlying genetic origins of lupus, several companies released clinical data on studies of potential new treatments, and Congress reaffirmed its commitment to provide greatly expanded federal support for lupus research and education programs.

### **A Potential New Treatment for Severe Discoid Lupus**

Discoid lupus is a form of lupus that affects the skin (cutaneous lupus). In most cases the discoid lupus rash appears on the face, neck, or scalp, though it can also show up on other areas of the skin. Severe discoid lupus may result in scarring. The treatments that are used most often for severe discoid lupus are strong immunosuppressants that may have significant side effects, especially when used over long periods of time. Efalizumab (trade name, Raptiva™) works by interfering with the function of overactive immune cells that are causing disease activity. The researchers in this study wanted to see if Raptiva could be effective in treating discoid lupus.

### **Chronic Lesions Versus Active Lesions in Lupus Nephritis**

For many years doctors have classified lupus nephritis (LN) by the extent of inflammation and where it occurs in the kidney. Under the original classification system developed in 1974 by the World Health Organization (WHO), there were six categories, or classes, of lupus nephritis, reflecting different ways in which inflammation could affect the kidney tissue. In 2003, changes to these WHO classifications were proposed. The researchers wanted to see if the new classifications could be used to predict how LN would progress and whether it would respond to treatment.

### **Antiphospholipid Antibodies: It May Matter Which Ones You Have**

One-third of people with lupus test positive for antiphospholipid antibodies (aPLs). The aPLs are a group of antibodies that interact with proteins that regulate blood clotting and blood vessel stability. Antiphospholipid antibodies can interfere with the normal function of blood vessels in various ways, which in turn can lead to complications such as immediate blood clots in arteries or veins, miscarriages, or more long-term damage to blood vessels, including hardening of the arteries (atherosclerosis) and later onset of heart disease and strokes.

### **Understanding Heart Disease in People with Lupus**

We hear a lot about heart disease, and many people know it's the number one killer among Americans, but you probably don't know it is also now among the leading causes of death for people with lupus. People with lupus have a higher risk of developing complications affecting the heart, usually from inflammation of the tissue and lining of the heart. Heart attacks and strokes also occur more frequently in people with lupus patients than in the general population. This is why a key part of the LFA's National Research Program is studying cardiovascular disease in people with lupus. It's very hard to predict which people with lupus ultimately might develop heart disease, or measure the severity of disease activity. The studies funded by LFA's research program are evaluating how to determine who could develop heart disease, and seeking to gain a better understanding of the heart disease process in people with lupus.