

Lupus Symptoms Index

Cardio-Vascular System

Anemia
Antiphospholipid Syndrome
Chest Pain
Endocarditis
Heart Attack
Leukopenia and Neutropenia
Myocarditis
Pericarditis
Thrombocytopenia

Central Nervous System (CNS)

Anxiety/Depression
CNS Vasculitis
Cognitive Dysfunction
Fibromyalgia
Lupus Headaches
Intracranial Hypertension (Pseudotumor Cerebri)
Peripheral Neuropathy
Stroke

Gastrointestinal Tract

Arteritis of the Large Intestine
Ascites
Chronic Diarrhea
Dysphagia
Gastroesophageal Reflux Disease (GERD)
Hepatomegaly
Lupus Hepatitis
Nausea & Vomiting
Pancreatitis

General

Death
Fatigue
Hair Loss
Insomnia
Lupus Panniculitis (Lupus Profundus)
Malaise
Opportunistic Infections
Photosensitivity
Unexplained Fevers
Weight loss or gain

Kidneys

Lupus Nephritis
Lupus Nephritis Ascites

Lungs

Chest Pain
Pleuritis
Pulmonary Embolism
Shortness of Breath

Mouth and Nose

Bullous SLE
Herpes Simplex (fever blisters)
Mouth and Nose Ulcers
Mucosal Discoid Lupus Erythematosus
Oral Candidiasis (Thrush)

Musculoskeletal Symptoms

Arthralgia
Arthritis
Avascular Necrosis (AVN)
Fibromyalgia
Muscle Pain (Myalgia)

Other Organs

Autoimmune Inner Ear Disease (AIED)
Eye Problems
Splenomegaly
Swollen Glands
Thyroiditis

Reproductive System

Birth Control & Hormone Replacement Issues
Increased Miscarriage Rate
Infertility caused by treatment
Lesions in genital area
Loss of Libido (sexual desire)
Premature Ovarian Failure

Skin

Allergic Reaction
Cutaneous Vasculitis
Discoid Lesions
Chilblain Lupus
Tumid Lupus Erythematosus
Verrucous Lupus Erythematosus (hypertrophic lupus erythematosus)
Malar Rash/Butterfly Rash
Petechiae
Purpura
Raynaud's Phenomenon
Subacute Cutaneous Lupus

Lupus Symptom List

Lupus is very different for each person and symptoms vary both in kind and in severity greatly not only from patient to patient, but also from time to time in the same patient. Lupus can affect ANY part of the body. Here is a list of Lupus symptoms as comprehensive as possible. Underlined symptoms are the most common.

Cardio-Vascular System

Anemia—This is the most common blood disorder in Lupus. Anemia means too little hemoglobin. Hemoglobin is the protein inside red cells that carries oxygen from the lungs to all the tissues of the body. The most common symptom of anemia is fatigue, other symptoms include: weakness, dizziness or fainting, rapid heart beat, feeling cold, sadness or depression, difficulty sleeping and decreased appetite. There are several different kinds/causes of anemia in Lupus. These include Anemia of Chronic Disease, Hemolytic Anemia, Anemia caused by Medications (especially chemotherapy medications), and Chronic Kidney Disease Anemia.

Antiphospholipid Syndrome—An autoimmune disorder common in Lupus, characterized by recurrent arterial or venous thrombosis and/or fetal losses coupled with persistently elevated levels of antibodies against phospholipids.

Chest Pain—This can be a sign of Lupus lung involvement or heart involvement, or it can be caused by many other things including heartburn, and fibromyalgia.

Endocarditis—Inflammation of the inside lining of the heart chambers and valves causing fatigue, weakness, fever, chills, heart murmur, shortness of breath, and swelling of the feet, legs and abdomen.

Heart Attack—Patients with Antiphospholipid Syndrome are at risk for heart attack.

Leukopenia and Neutropenia—A low white blood cell count can cause an much increased risk for infection. In Lupus this is usually caused by the medications used to treat other symptoms.

Myocarditis—Inflammation of the heart muscle, causing unexplained rapid heart beat, irregular heart beat, abnormal electrocardiogram, and heart failure.

Pericarditis—Inflammation of the membrane covering the heart. It may cause sharp chest pain that changes when the body's position changes, it may feel like a heart attack. It occasionally also causes shortness of breath.

Thrombocytopenia—This is a low platelet count. Symptoms of Thrombocytopenia are easy bruising, tiny red bleeding points called petechiae, and nose bleeds.

Vasculitis—Inflammation of the blood vessels causing red or purple dots under the skin from bleeding into the tissue. This is usually found on the legs. The smaller , "pin point" dots are called petechiae, and the larger ones are called purpura and sometimes look like large bruises.

Central Nervous System (CNS)

Anxiety/Depression—Anxiety and depression are common symptoms felt by Lupus patients. These symptoms can be caused by the Lupus, the medications used to treat it, or the stresses of dealing with a chronic illness.

CNS Vasculitis—This symptom is inflammation of the blood vessels of the brain. It is characterized by high fevers, psychosis, seizures, and meningitis like neck stiffness, leading to stupor and coma if not quickly, and aggressively treated.

Cognitive Dysfunction—This may include memory loss, loss of concentration, confusion, difficulty expressing thoughts, etc. This, as with any Lupus symptom can be an intermittent or constant issue.

Fibromyalgia—Up to 20% of people with SLE have a simultaneous Fibromyalgia evidenced by tender points and increased pain in the soft tissues. Patients may also experience cognitive dysfunction, difficulty sleeping, and lack of stamina.

Lupus Headaches—The Lupus headache is very similar to a migraine. It is more common in Lupus patients with Antiphospholipid Syndrome or Raynaud's Phenomenon. It is traditionally treated the same as normal migraines, although corticosteroids are also usually helpful, distinguishing it from other types of migraines.

Intracranial Hypertension (Pseudotumor Cerebri) - This is a rare complication of Lupus and can also be caused by the medications used to treat Lupus. The most common symptoms are severe non-specific headaches, transient altered vision, and tinnitus. Other symptoms can include stiff neck, back pain, double vision, pain behind the eyes, and exercise intolerance. Diagnosis is done by complete eye examination, tests to rule out other causes of increased pressure and finally a high opening pressure revealed by a lumbar puncture (spinal tap).

Peripheral Neuropathy—A symptom most commonly associated with Diabetes, this can also be caused by Lupus. Peripheral nerves are the nerves located in your face, arms, legs and torso. When these nerves do not communicate properly with the spinal cord it is called peripheral neuropathy. This can cause pain, numbness, tingling, burning or itching.

Stroke—Patients with Antiphospholipid Syndrome are at risk for stroke.

Gastrointestinal Tract

Arteritis of the Large Intestine—Inflammation in the bowel can cause diarrhea, lower abdominal pain and may even result in ulceration of the intestine.

Ascites—Excessive fluid build-up in the peritoneal cavity. May be caused by nephritis or other organ involvement.

Dysphagia—Arthritis in the esophagus can cause motility problems resulting in painful or difficult swallowing, usually limited to solids.

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Chronic Diarrhea—Some causes in SLE patients include medication side effects, arteritis of the large intestine, pancreatitis, and splenomegaly. This is a potentially dangerous symptom that can lead to dehydration. If you are having this symptom you should be closely monitored by a doctor.

Gastroesophageal Reflux Disease (GERD) - This is a condition in which food and/or liquid travels backwards from the stomach up the esophagus. It is common in Lupus patients due to medications such as corticosteroids, and NSAIDS.

Hepatomegaly—Enlargement of the liver can be caused by Lupus. This can cause a feeling of fullness under the right ribcage and tenderness when pressed on.

Lupus Hepatitis—Inflammation of the liver can be caused by both the Lupus itself or the medications used to treat it. Symptoms include: dark urine, loss of appetite, nausea, vomiting, abdominal distension, pale or clay colored stools, fatigue, malaise, generalized itching.

Nausea & Vomiting—These can be caused by arthritis in the stomach or small intestine. It may also be caused by a "pseudo-obstruction" (motility issue most likely caused by arteritis) of the intestine. Medication side effect is also a common cause of these symptoms in Lupus patients.

Pancreatitis—Inflammation of the pancreas can cause severe abdominal pain in the upper middle or upper left part of the abdomen that may radiate to the back, nausea, vomiting, fever, chills, swollen or tender belly, and a rapid heartbeat. Chronic pancreatitis can also cause anemia, inability to digest food, diabetes and jaundice.

General

Death—While Lupus is no longer a death sentence, an estimated 20,000 Americans each year are still dying from this disease. With treatment, most patients do live nearly normal, full lives and never have organ involvement or life-threatening disease. While this symptom is not listed to scare anybody, it is listed to alert everybody to the fact that this disease is still killing.

Deconditioning - The pain and fatigue caused by Lupus can easily lead to a loss of stamina, muscle tone and flexibility. It is important to try to minimize this with regular exercise whenever possible.

Fatigue—Extreme or persistent fatigue is a common symptom of Lupus.

Hair Loss—This can be either in patches or all over the head. It is usually temporary. It is estimated that 27% of Lupus patients have this symptom. This is also a common side effect of some of the medications used to treat Lupus.

Insomnia—Insomnia, defined as a chronic inability to fall asleep or stay asleep for an adequate amount of time, can be a direct result of Lupus or a side effect of the medications used to treat Lupus.

Lupus Panniculitis (Lupus Profundus) - Inflammation of the subcutaneous fat. The skin in the area feels thickened and is often raised. It may or may not be discolored. The area is often tender. The face is the most commonly affected area. The Lupus completely kills the fat cell and leaves firm deep nodules that can last for months or years.

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Malaise—A generalized sick feeling.

Opportunistic Infections—Infections that take advantage of the body's compromised immune system can be a result of the Lupus itself or more commonly the medications used to treat Lupus.

Photosensitivity—A skin rash as a result of sunlight is known as photosensitivity. Exposure to any ultraviolet B light (such as sunlight or tanning beds) typically causes or worsens Lupus skin rashes and can trigger lupus flares. Some medications can further increase the effects of UVB light on the body. Fluorescent lighting also emits UVB light and can cause photosensitivity. more on fluorescent lighting...

Unexplained Fevers—Low grade, unexplained fevers are a very common Lupus symptom being reported by as many as 90% of patients.

Weight loss or gain—Many Lupus patients experience things like nausea, vomiting, and loss of appetite that lead to unintentional weight loss or gain. This is also a common side effect of some of the medications used to treat Lupus.

Kidneys

Lupus Nephritis—Lupus Nephritis is inflammation of the kidney caused by SLE, characterized by damage to the kidneys and progressive loss of kidney function. Symptoms include: blood and/or protein in the urine, elevated blood pressure, abnormal blood studies, swelling especially in the ankles, hands and face. This can be a life-threatening complication of Lupus.

Lupus Nephritis Ascites—Ascites is defined as excessive fluid built up within the peritoneal cavity. The abdominal organs and the abdomen itself are lined with membranes called the peritoneum. Between these two linings is a space referred to as the peritoneal cavity. In Lupus Nephritis, fluid can build up in the peritoneal cavity.

Lungs

Chest Pain—This can be a sign of Lupus lung involvement or heart involvement, or it can be caused by many other things including heartburn, and fibromyalgia.

Pleuritis—Pleuritis is inflammation of the membrane around the lungs. It can cause severe, sharp, stabbing pain to specific areas of the chest that may be made worse by taking a deep breath, laughing, sneezing, or coughing.

Pulmonary Embolism—This is a symptom that occurs primarily in patients who have the antiphospholipid antibody, or Lupus anticoagulant. A pulmonary embolism is the sudden blocking of an artery in a lung, usually by a blood clot. Symptoms are a sudden onset of chest pain & shortness of breath, coughing, & fever.

Shortness of Breath—This can be a sign of Lupus lung involvement or it can be caused by the deconditioning common in Lupus.

Mouth and Nose

Bullous SLE—This is a rare but serious disease in which patients have antibodies against their own skin and mouth. Lesions associated with this condition consist of grouped blisters typically on the head and neck but can be on the arms, and legs. Systemic corticosteroids and immunosuppressives are typically the treatment for this disease.

Herpes Simplex (fever blisters) - This symptom is listed because it usually appears as a side effect of immunosuppressive therapy. These lesions appear as small groups of painful, fluid filled blisters that usually go away without medical treatment within 2-4 weeks. These are also common among the regular population.

Mouth and Nose Ulcers—Only about 12% of Lupus patients experience this symptom. These ulcers form in either the mouth or the nose causing soreness, difficulty chewing, swelling and visible sores when in the mouth.

Mucosal Discoid Lupus Erythematosus—This most commonly affects the inner cheeks and the lips. These lesions resemble red plaques surrounded by lacy whitish areas and are quite painful. Mucosal DLE should be treated both systemically and topically, typically with corticosteroids.

Oral Candidiasis (Thrush) - This symptom again is usually a side effect of immunosuppressive therapy. This appears as a whitish-red, flaky plaques that can affect any area of the mouth and usually the esophagus. Patients may feel a burning sensation or difficulty swallowing. Oral anti-fungals are used to treat this.

Musculoskeletal Symptoms

Arthralgia—Joint pain is VERY common in SLE. 90% of Lupus patients will experience joint or muscle pain. This is different from arthritis which is inflammation of the joints.

Arthritis—Arthritis is defined as inflammation of a joint that is usually accompanied by pain, swelling, tenderness and stiffness. In Lupus joints are typically warm and red and often fluid collects.

Avascular Necrosis (AVN) - Poor blood supply to an area leads to bone death. It typically affects the hips, shoulders and knees. The initial symptom is pain, which leads to muscle spasm, stiffness and limited mobility of the affected joint. High doses of steroids increase the risk of developing AVN. Advanced cases may require joint replacement surgery.

Fibromyalgia—Up to 20% of people with SLE have a simultaneous Fibromyalgia evidenced by tender points and increased pain in the soft tissues. Patients may also experience cognitive dysfunction, difficulty sleeping, and lack of stamina.

Muscle Pain (Myalgia) - Muscle pain and weakness may be caused by inflammation of the muscles. Myalgia is often diffuse and nonspecific.

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Other Organs

Autoimmune Inner Ear Disease (AIED) - When antibodies attack the inner ear it is called autoimmune inner ear disease. This can cause dizziness, vertigo, tinnitus (ringing in the ears), and progressive hearing loss.

Splenomegaly—Enlargement of the spleen can be caused by Lupus. Symptoms may include nausea, diarrhea and abdominal pain.

Eye Problems—Eye problems in Lupus can be caused by the Lupus itself or by the corticosteroids and antimalarials used to treat Lupus. Conjunctivitis, inflammation of tissues around the eye, is more common among lupus patients since they are more susceptible to infection. Iritis, inflammation of the iris, is also a recurrent problem in some patients. Other possible eye problems include glaucoma, cataracts, general changes in vision, dry eyes, blocked tear ducts, Pseudotumor Cerebri and on very rare occasions, blindness can result. Warning signs may include development of a rash over the eyelids, mucus discharge from the eye, blurred vision, sensitivity to light, headaches, a sore, red eye, lack of tears, and eyes that hurt and are dry, episodes of flashing lights and partial blindness.

Swollen Glands—Up to 50% of Lupus patients will have swollen lymph glands.

Thyroiditis—Inflammation of the thyroid gland can cause many symptoms of hyperthyroidism including rapid heart beat, nervousness, tremor, weight loss, heat intolerance, sweating, fever, diarrhea, sleep disturbance weakness, and fatigue. Later symptoms of hypothyroidism such as fatigue, weight gain, constipation and cold intolerance may be felt. This is not really caused by Lupus rather is common in Lupus patients.

Reproductive System

Birth Control & Hormone Replacement Issues—Some scientists believe there may be a link between estrogen and Lupus. Because of this they recommend that Lupus patients do not use estrogen containing birth control methods.

Increased Miscarriage Rate—Lupus patients have a much greater risk for miscarriage and high risk pregnancies than the normal population. Patients with the antiphospholipid antibody in particular are at greater risk for miscarriage. Whenever possible discuss your Lupus and pregnancy plans with your Rheumatologist and OB/Gyn before becoming pregnant.

Infertility caused by treatment—Some of the treatments used in Lupus can cause infertility such as Cytoxan. Family planning should be discussed before beginning aggressive immunosuppressive therapy.

Lesions in genital area—Lupus patients can get ulcers similar to the ones they get in their mouth or nose in their genital area. Discoid lesions as well as Bullous SLE lesions in the genital area also occur. Fungal infections secondary to immunosuppression is also common.

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Loss of Libido (sexual desire) - Between the chronic pain, and fatigue, and the stresses of dealing with chronic illness loss of sexual desire is very common in Lupus. Also many of the medications used to treat Lupus, particularly anti-depressants list loss of sexual desire as a side effect.

Premature Ovarian Failure—Sometimes referred to as early menopause, Premature Ovarian Failure is defined as Amenorrhea (cessation of periods) before age 40 due to failure of the ovaries. One of the causes of this is Systemic Lupus Erythematosus. Patients with this condition go through all the symptoms of menopause at a very young age sometimes as young as in their teens.

Skin

Allergic Reaction—Many Lupus medications can cause a rash caused by allergic reaction. If you have a new rash, consider any new medications as a culprit.

Cutaneous Vasculitis—Inflammation of the blood vessels in the skin is known as Cutaneous Vasculitis. Cutaneous Vasculitis usually causes small red or purple spots on the lower legs. Sometimes nodules and ulcers can develop.

Discoid Lesions—Discoid lesions are thick, scarring, raised or flat, red, with well-defined borders, which appear on sun-exposed surfaces, but in rare cases can be found on non-sun-exposed areas. They generally do not itch.

Chilblain Lupus—Chilblain Lupus is a variant of DLE. Chilblain lesions are tender, purplish-blue or red, swollen nodules. These are mostly on the toes and fingers but can also be on the heels, calves, knees, nose, and ears. These lesions may become very painful and very itchy. They are typically caused by an abnormal reaction to cold. In extreme cases skin may crack and infection may occur.

Tumid Lupus Erythematosus - TLE is a rare variant of DLE characterized by edematous (swollen with excess fluid) erythematosus plaques that are usually on the trunk.

Verrucous Lupus Erythematosus (hypertrophic lupus erythematosus) - With this variant of DLE patients present with non-itchy, bumpy lesions on the arms and hands.

Malar Rash/Butterfly Rash—Malar refers to the zygomatic bone (cheek). This rash is over the cheeks and bridge of the nose, typically in the shape of a butterfly. It can be dark red even purplish or just pink, it can be "blotchy" or solid, and is usually not raised. The rash can be mildly scaly. It typically does not itch. It can come and go lasting hours, days, weeks or longer. It can worsen over time or fade over time. As many as 65% of Lupus patients have a malar rash.

Petechiae—Very small (pinpoint) red spots on the skin caused by bleeding under the skin. Can be caused by Vasculitis or thrombocytopenia.

Purpura—Red or purple discolorations of the skin caused by bleeding under the skin. Can be caused by Vasculitis or thrombocytopenia.

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Raynaud's Phenomenon—This condition affects the skin's blood vessels and may cause the fingers and toes to turn pale or white and then blue. The skin affected may feel numb, tingly, and cold to the touch. About 20% of Lupus patients have this symptom.

Subacute Cutaneous Lupus—These papulosquamous lesions are red, elevated areas of skin with distinct margins. Annular lesions are red and ring shaped. Both kinds are typically dry, and do not itch. These rashes most commonly appear on sun exposed areas, most commonly the neck, chest, upper back, arms and face. Other areas can be affected as well.

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