



Society of Dermatology
SkinCare Specialists
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Approved Provider

SYSTEMIC LUPUS ERYTHEMATOSUS

COA#PCIA0819

CE Activity provided by PCI Journal

INSTRUCTIONS

1. Read the article.
2. Take the test, record your answers in the test answer section (Section B) on CE Registration Form.
3. Complete the CE Registration information (Section A) and Course Evaluation (Section C).
4. Mail completed CE Registration Form and fee to: PCI Journal, 484 Spring Avenue, Ridgewood, NJ 07450-4624.

PROVIDER ACCREDITATION

Paramedical Consultants, Inc., publishers of the PCI Journal and WWU have been approved by the NCEA COA. This educational activity has been approved for 1.0 CE – COA#PCIA0819

GENERAL PURPOSE STATEMENT

To provide the skin care professional with a review of *Systemic Lupus Erythematosus*.

LEARNING OBJECTIVES

After reading this article and taking this test, the skin care professional will be able to:

1. Understand the causes and how to recognize SLE.
2. Understand the different treatment options available for SLE patients.

SYSTEMIC LUPUS ERYTHEMATOSUS *CE Activity provided by PCI Journal*

Systemic Lupus Erythematosus, SLE, or simply lupus, is a chronic autoimmune disease. Autoimmune diseases can be categorized by the immune system mistakenly attacking what the immune system is normally designed to protect. Normally, a person's immune system defends the body from any foreign germs, producing antibodies, which are blood proteins. When lupus occurs, however, the immune system produces autoantibodies instead which in turn do the very opposite of the antibodies job and result in attacking the body. This disease can affect everything from the brain, joints, kidney, skin and other organs in between. There are other kinds of lupus besides systemic lupus erythematosus including: discoid lupus erythematosus, subacute lupus erythematosus, drug-induced lupus and neonatal lupus.

Causes

Unfortunately, lupus has proved to be a very complicated disease and a single cause has not yet been discovered. Studies have shown that lupus is likely a combination of one's environment and genetic makeup. It is possible that triggers from the environment react with predisposed genetic markers. Potential triggers doctors have discovered include: medications (and drug allergies), infections/viruses, and sunlight. Medications and drug allergies can be a big helping-hand triggering lupus with the body reacting against it, however drug-induced lupus usually ends when the patient stops taking the medication. Infections, especially those related to the immune system can trigger the misfiring of antibodies. Overexposure to the sun can initiate lupus skin lesions and even trigger internal reactions in extreme cases.

Symptoms

Symptoms for systemic lupus erythematosus vary from patient to patient and many come and go throughout the illness. It is very common for lupus patients to go through flares, or episodes, where their symptoms become extreme for some time then suddenly improve. The most common symptom is joint pain, along with swelling. The most commonly affected areas are the joints of hands, fingers, wrists and knees. Along with the joint discomfort, there are many external symptoms affecting the skin that can identify lupus including: malar rash, a butterfly-shaped rash on the face (it can extend from cheek to cheek covering the bridge of the

nose), discoid rash, a red rash accompanied by raised oval patches, skin lesions (usually worsen with exposure to the sun, white or blue fingers and toes when exposed to the cold, and patchy skin color. These symptoms, paired with internal discomforts can be signals that one is suffering from SLE.

Diagnosis

Knowing how varied lupus symptoms can be, ranging from their severeness to their duration of pain, lupus can be extremely difficult to diagnose. Usually, the patient must be showing four common signs of the disease, have blood and urine tests and a physical examination to truly diagnose this disease. The most common test a doctor will perform is to look to see if the patient has antinuclear antibodies, even though nearly all lupus cases will be found with this positive, however this test alone cannot diagnose lupus. Other tests they could follow up with includes a complete blood count, an erythrocyte sedimentation rate, and a kidney and liver assessment. For patients suffering from noticeable skin irritations, they can also perform skin biopsies.

Treatment

To date, there is no cure for systemic lupus erythematosus. However, working with a doctor to make up a treatment plan one can successfully control their symptoms. Treatment differs between patients depending on their symptoms and severity. Symptoms that affect the lungs, kidneys, heart and other internal organs may need to be treated by specialists. The goals for the treatment plan include preventing more flares, treating them as soon as they do occur and minimize any internal complications. Medications, however, can be very helpful in patients with mild symptoms like nonsteroidal anti-inflammatory drugs, antimalarial drugs, corticosteroids and immunosuppressants.

References:

- <https://medlineplus.gov/ency/article/000435.htm?PHPSESSID=356535a123c3da6973068c00377a1fd1>
- <http://www.rheumatology.org/I-Am-A/Patient-Caregiver/Diseases-Conditions/Lupus>
- <http://www.mayoclinic.org/diseases-conditions/lupus/basics/definition/con-20019676>
- http://www.niams.nih.gov/health_info/lupus/

CE TEST SYSTEMIC LUPUS ERYTHEMATOSUS

1. What kind of disease is systemic lupus erythematosus?
 - a. musculoskeletal
 - b. autoimmune
 - c. congenital
 - d. metabolic
2. The immune system normally produces:
 - a. hormones
 - b. red blood cells
 - c. antibodies
 - d. white blood cells
3. SLE can affect the:
 - a. kidneys
 - b. brain
 - c. skin
 - d. all of the above
4. Which is not a kind of lupus?
 - a. discoid
 - b. subacute
 - c. neonatal
 - d. scleroderma
5. The cause of lupus is generally the combination of:
 - a. bacteria and smoking
 - b. environment and genetic markers
 - c. injury and poor diet
 - d. exchange of bodily fluid and mosquitos
6. What is a potential trigger for lupus?
 - a. sunlight
 - b. medications
 - c. infections
 - d. all of the above
7. When does drug-induced lupus usually end?
 - a. after taking more medication
 - b. after aggressive treatment
 - c. when the patient stops taking the problem medication
 - d. it goes away on its own
8. A lupus patient' overexposure to sun can result in?
 - a. white/blue finger tips
 - b. skin lesions
 - c. itchy eyes
 - d. restlessness
9. What are episodes of symptoms referred to as?
 - a. incidents
 - b. scenes
 - c. phases
 - d. flares
10. The most common symptom is:
 - a. joint pain
 - b. headache
 - c. fever
 - d. muscle pain
11. Which is not one of the commonly affected joints?
 - a. wrists
 - b. knees
 - c. hips
 - d. fingers
12. A discoid rash is a:
 - a. butterfly-shaped rash on the face
 - b. scaly rash that becomes Itchy
 - c. moist rash with yellowish scabs
 - d. red rash with raised oval patches
13. When exposed to the cold, fingers and toes tend to:
 - a. burn
 - b. turn white/blue
 - c. hurt to touch
 - d. become sore
14. How many common symptoms should a patient have before the doctor considers SLE?
 - a. 6
 - b. 1
 - c. 4
 - d. 3
15. The most common diagnostic test a doctor will perform will be a:
 - a. urine test
 - b. physical exam
 - c. eye exam
 - d. antinuclear antibodies test
16. What can a physician do if the patient has noticeable skin irritations?
 - a. perform a physical
 - b. order an x-ray
 - c. order a CAT scan
 - d. perform skin biopsies
17. When should a lupus patient consider treatment with a specialist? When the
 - a. disease is affecting their inner organs
 - b. symptoms non-severe
 - c. symptoms are only skin-related
 - d. patient is unsure of their diagnosis
18. What medications can be helpful to treat lupus?
 - a. antimalarial
 - b. nonsteroidal anti-inflammatory
 - c. immunosuppressants
 - d. all of the above

CE REGISTRATION FORM

Section A	SYSTEMIC LUPUS ERYTHEMATOSUS	COA# PCIA0819
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PRINT CLEARLY (*Illegible forms will not be processed*)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ + _____

Tel: _____ Fax: _____

Email: _____ *Delivery Method used to send CE Certificate

Are you certified? Yes No

NCEA Certification# _____

Other Certification _____

Type of License:

Esthetician Cosmetologist Medical Professional Other

License # _____ State of Issue _____

Section B

Test Answers:

Darken one for your answer to each question

	A	B	C	D		A	B	C	D
1.	o	o	o	o	10.	o	o	o	o
2.	o	o	o	o	11.	o	o	o	o
3.	o	o	o	o	12.	o	o	o	o
4.	o	o	o	o	13.	o	o	o	o
5.	o	o	o	o	14.	o	o	o	o
6.	o	o	o	o	15.	o	o	o	o
7.	o	o	o	o	16.	o	o	o	o
8.	o	o	o	o	17.	o	o	o	o
9.	o	o	o	o	18.	o	o	o	o

Section C

Course Evaluation:

1. Did this CE activity's learning objective relate to its general purpose? Yes No
2. Was the elearning format an effective way to present this material? Yes No
3. Was the content relevant to your skin care practice? Yes No
4. How long in minutes did it take you to read the article _____, study the material _____, and take the test _____?
5. Suggestions for future topics _____

Section D

Payments and Discounts:

The registration fee for this test is \$24.95. (Check or money order payable to PCI Journal)
 Society of Dermatology SkinCare Specialists Members - \$4.95

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