

Genealogy may affect clinical differences in systemic lupus erythmatosus patients

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The effects of Systemic Lupus Erythematosus (SLE) may differ based on the individual patient's genealogical heritage, according to results of a new study presented today at EULAR 2010, the Annual Congress of the European League Against Rheumatism in Rome, Italy. In particular, the study reinforced differences in SLE phenotype found between Northern and Southern European subpopulations.

Results from a Europe-wide study, involving 1,555 SLE patients from nine European countries, showed that photosensitivity was 9.4% more prevalent among patients from the Northern group (p=0.00056) versus the Southern group, while arthritis was 10.7% more prevalent in patients from the Southern group (p=0.0000017) versus the Northern group. These findings replicated results from previous studies.

"SLE affects 40 people in every 100,000 in Europe, so our study helps us further understand the impact of this complex disease on patients," said Professor Antonio Gonzalez, Rheumatology Unit, Hospital Clinico Universitario, Santiago de Compostela, Spain, and lead author of the study. Our research reinforces results from previous studies that prove there is evidence of genetic differences between SLE patients from Northern or Southern Europe. Therefore, results from studies in European SLE patients should acknowledge genealogy when reporting clinical differences between patients prior to providing their conclusions."

The study compared 475 SLE patients from Northern Europe (Germany,



Hungary, The Czech Republic, The Netherlands, and Slovakia) with 1,080 SLE patients from Southern Europe (Greece, Italy, Portugal, and Spain). Investigators analysed the prevalence of the following clinical features between the recruiting centres in the Northern and in the Southern subgroups: serositis, immunologic disorder, malar rash, photosensitivity, arthritis, haematologic disorder, antinuclear antibodies and mean age of disease onset.

Provided by European League Against Rheumatism

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