A rare presentation of SLE in a male: A case report

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INTRODUCTION:
SLE is a multisystem autoimmune disease most commonly seen in females of reproductive age group. The disease is characterized by the development of autoantibodies against various body proteins. It can present with a wide variety of clinical presentations which may result in delay in diagnosis. Prevalence of SLE is 20 to 150 per 100,000 and is typically seen in women. However, it may affect male and female patients at any age.[1]

CASE REPORT:
A 41 year old male patient came with a complaint of fever-intermittent and low grade since 3 months, rash all over the body including face since 2 months, oedema of both lower limbs since 1 month, and altered sensorium for 2 days. Patient was diagnosed with cutaneous tuberculosis at a local hospital 1 month ago and was started on ATT but found no improvement. Patient was diagnosed with schizophrenia and hypothyroidism 5 years back and was on treatment. On examination, oral ulcers are present. After stabilization of patient, we ordered for a collagen profile which revealed strong positive for ANA and Anti-dsDNA suggesting SLE. Patient was treated with i.v.methyl prednisolone and pulse cyclophosphamide therapy. Patient condition improved, skin lesions healed and was discharged on oral steroids and azathioprine and is on follow up.

DISCUSSION:
Systemic Lupus Erythematosus(SLE) is a rare phenomenon and also to highlight the rare manifestations of SLE in males like psychosis and hypothyroidism.

CONCLUSION:
High index of suspicion is needed for diagnosis and treatment of SLE in males to prevent disease progression, morbidity and mortality. So, we report a case of SLE in male presenting as Vasculitis which is a rare phenomenon and also to highlight the rare manifestations of SLE in males like psychosis and hypothyroidism.
ver there is high frequency of infection, particularly tuberculosis in male patients. However, the prevalence of alopecia, arthralgia, Raynaud's phenomenon, hypothyroidism and psychosis are lower than in females.[2,3] It has been observed that male SLE patients from India have higher incidence of mucocutaneous and renal involvement and a lower incidence of neuropsychiatric, gastrointestinal and haematological disease in comparison to those published from the developed countries.[4] This patient fulfilled the criteria for SLE. We report this case because of the rarity of SLE in male and it's presentation as vasculitis and association with hypothyroidism and psychosis.

CONCLUSION:
SLE can have varied clinical presentation. High index of suspicion is needed to arrive at a proper diagnosis at the earliest, especially in male sex, in order to minimize morbidity and mortality associated with the disease.

Figure 1:

Figure 2:

Figure 3:

REFERENCE