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LUPUS: PSYCHOSOCIAL IMPACT, COPING AND MENTAL HEALTH

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Introduction: Systemic lupus erythematous (SLE) is the paradigm of chronic systemic diseases. It has a strong impact regarding patient's quality of life and the ability to work, which carries high direct and indirect costs. Intervention strategies promoting appropriate coping seem to have an important positive effect on quality of life. Neuropsychiatric symptoms are common.

Objectives and aims: To review the literature on psychosocial impact of SLE, understand which coping strategies are more often used, and to know what are the most common SLE neuropsychiatric manifestations.

Methods: The authors have conducted an online search in PubMed with the terms “SLE + Psychiatry” and “SLE + Mental health” from 1995 until 2012. From the outcome were collected, analyzed and summarized the articles considered to be relevant.

Results: Indirect costs represents 2/3 of the total cost associated with SLE. Inability to work is common (23%) and it is related to multiple factors. Patients with SLE tend to use coping skills that are generally adopted for events perceived as nonmodifiable. The immune system might play a role in the aetiopathogenesis of psychiatric diseases. Neuropsychiatric SLE symptoms are frequent (20-75%), especially depression (10.8-39.6%) and cognitive deficits (>40%).

Conclusions: SLE is a chronic systemic disease with a high psychosocial impact. Using active coping strategies seems to improve patient's quality of life. Neuropsychiatric manifestations are common. A detailed study on disease impact will probably allow an earlier screening that lead to a more accurate diagnosis and treatment, promoting better mental health and prognosis in SLE patients.