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A case report of bullous lupus erythematosus in a 39 year old female

Lucyle Carmela D Abrasia
Southern Philippines Medical Center, Philippines

Bullous systemic lupus erythematosus is a rare sub type of systemic lupus erythematosus (SLE) which occurs in less than 1% of patients with SLE. It is characterized by vesicular to bullous lesion with erythematous borders. Bullous lesion may be the first manifestation of SLE, requiring a high degree of clinical suspicion. This is case of a 38 year old female who came in due to generalized violaceous skin lesions associated with shortness of breath and body weakness. The patient initially manages as bullous pemphigoid. The patient eventually had onset of joint pains, oral ulcers, alopecia and body fatigue. Skin biopsy revealed interface dermatitis and direct immunofluorescence which resulted in strong granular deposits of IgG (+3), weak intermittent linear deposits of IgA (+1) and IgM (+/-) at the basement membrane zone supporting a diagnosis of bullous SLE. The patient was maintained on prednisone with no reported recurrence of skin lesions and other symptoms.

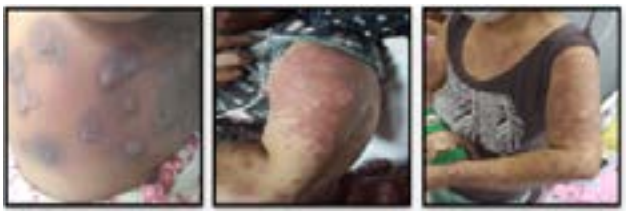

Figure 1: Bullous and maculo-papular skin lesions.

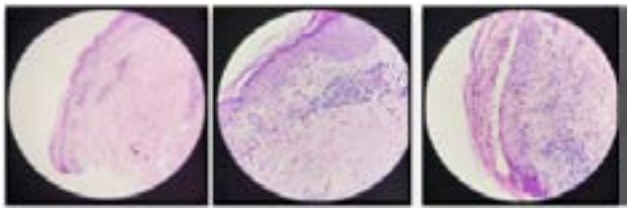

Figure 2: Skin biopsy results revelaed interface dermatitis.

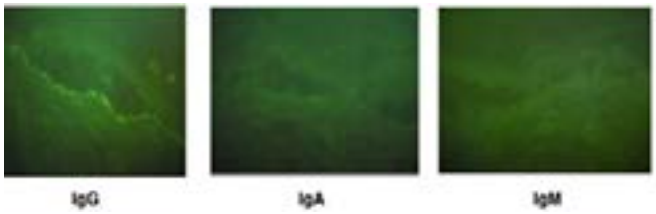

Figure 3: Direct immunofluorescence: strongly granular

Deposits of IgG (+3), weak intermittent linear deposits of IgA (+1) and IgM (+/-) at the basement membrane zone.

Biography

Lucyle Carmela D. Abrasia, RN, MD, was born in General Santos City, Philippines and is a graduate of San Pedro College where she obtained her Bachelor in Science in Nursing. She had her medical degree at Davao Medical School Foundation, Inc. She trained in internal medicine at Southern Philippines Medical Center and currently on her third year in training. Dr. Abrasia is a member of Philippine Medical Association. She is currently residing in Davao City, Philippines.

lucyle1222@gmail.com

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