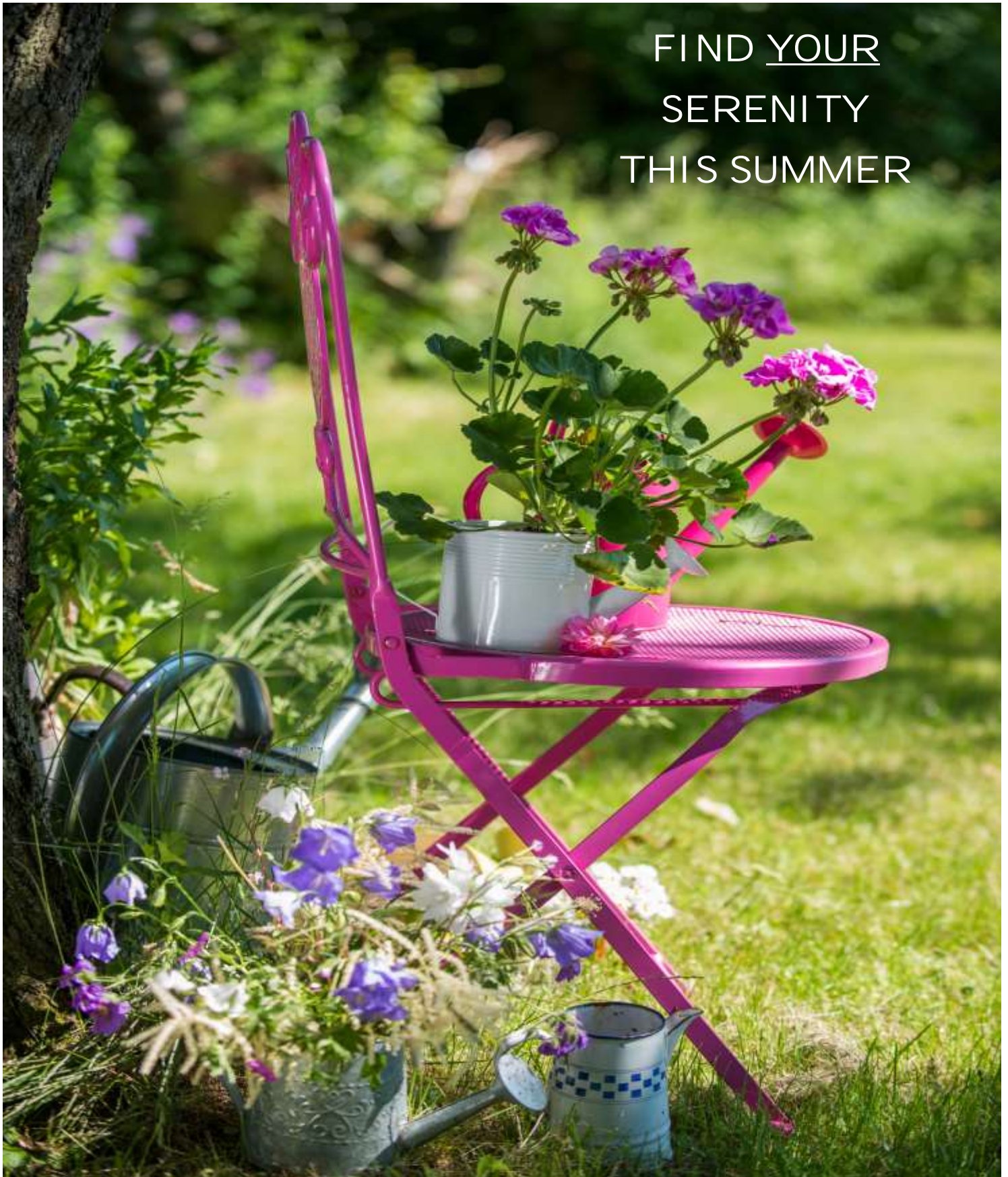




FIND YOUR  
SERENITY  
THIS SUMMER



## A Message from the President

It has been a busy spring and summer so far at Lupus Ontario! Our Medical Symposium on April 22<sup>nd</sup> was well attended and provided everyone with an opportunity to interact with medical experts and gain new insights into the latest research and the management of lupus. Thanks to our many volunteers, there have been 10 Walks for Lupus Ontario throughout the province. So far, these walks have raised over \$90,000 for lupus research and patient support. They were also a great way for the lupus community to come together and raise awareness in local communities. At each walk I attended, I was inspired by the lupus patients, their families and friends and their determination to raise funds and awareness to eventually find a cure. To donate to any of the 2017 walks, go to [www.walkforlupusontario.org](http://www.walkforlupusontario.org). There are more walks and events scheduled from now until the end of September. Keep an eye on your social media and our website for more details.

The office staff and board members are currently planning for our new fiscal year. We expect to have our new website up and running by October 1<sup>st</sup>. Our overall focus for 2017 – 2018 is to strengthen our presence in the province and to improve the services and information that we provide to lupus patients and their caregivers. I look forward to giving you an update on our current year results and future plans in the next newsletter issue.

I wish everyone a safe and relaxing summer with friends and family.

Thank You

Linda Keill, President

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## A Tribute to Marlene Burgess

I've been asked to tell you about a wonderful woman who had a very special place in my heart and in many hearts here in Barrie and at Lupus Ontario. She was known for her quiet ways and her ability to LISTEN. Not a virtue that is easy to find.

Marlene led an adventurous life. Early in her life she and her then partner built a log cabin including felling their own trees. She travelled a few times across Canada by motorcycle while camping all the way. In later years, with her beloved husband Tom, she travelled around Canada, the USA and Europe. Some of those years she travelled with her walker. Marlene didn't let things like bad knees get in the way of seeing Alaska or most of Europe.

I could give you a litany of Marlene's ailments; they include a lot of what you and I have; and a few of her own. But what you really need to know is that they didn't defeat her; she found ways around them.

Marlene developed congestive heart failure a few years ago. This ailment continually caused her to be either hospitalized or housebound for weeks at a time. But she never gave up hope for long. I saw her the week before she passed away. Two of us had gone to see her at her home. I suggested I could clean off her counter and put away the cans of beans and tomatoes that were stacked there. She told me to leave them there so they were accessible next week when she was feeling better she could cook up a batch of chilli for the freezer.

Marlene was very good at listening and for most of us that is what we need in the beginning of our journey. For many of us (including me) she was the first person who talked to us about lupus other than a doctor or google.

Marlene would spend hours talking with someone who had just found out they had lupus; or that someone in their family had lupus.

In one case, she talked to the person with lupus, the wife and then when his parents flew in from Europe they wanted to talk with her. It was a relationship that would last many years.

Dear Marlene, thank you for your inspiration and your years of dedication. You will be missed.

Written and submitted by: Jan Gillis



## Ontario Service Awards Go To.....

Lupus Ontario's Board of Directors and Staff would like to thank all Lupus Ontario volunteers, as you all go above and beyond to help raise funds for Lupus Research. Without you, we would not succeed; you all greatly contribute to achieving our goal of finding a cure for lupus. Thank you!

### Receiving Ontario Service Awards:

**Charles Werner 5 yrs, Heidi Nielsen 5 yrs, Sharon Lyon 5 yrs, Kevin McGill 5 yrs, Ruth Werner 10 yrs, Janet Butler 10 yrs, Tom Koor 10 yrs, Heather Knoll 15 yrs, Brenda Cardillo 15 yrs, Joni Waiser 15 yrs, Elaine Gareau 20 yrs, Cathy Ferren 25 yrs, Betty Wong 25 yrs and Gloria Checkley 30 yrs.**



### Lupus Ontario's Mission

Lupus Ontario is a team of caring and enthusiastic volunteers and staff who are passionately committed to helping those with lupus live longer and better by raising funds that deliver vital support, education, awareness and research.



## Organizing an event for Lupus Ontario Helps in many ways

### “Getting Lucky for Lupus”—Casino Rama Bus Trip, Sep 9



*SEPTEMBER 9, 2017*

*“GETTING LUCKY FOR LUPUS”*

*CASINO RAMA 9:30 AM TO 7:00 PM*

**First pickup** will be in Brampton  
Shoppers World, 499 Main St S at  
9:30 AM. Please be there at 9:15 AM

**Second pickup** will be at Scarborough  
Town Centre, 300 Borough Dr at 10:00 AM  
Please be there at 9:45 AM.

**Third Pickup** will be at the Oshawa  
Centre, 419 King St W at 10:30 AM.  
Please be there at 10:15 AM.

**\$25.00 PER PERSON**

*Lunch Included*  
(Ticket orders on or before August 26)  
(\$20.00 charitable receipt)

We accept Visa/MC/AMEX, Cheque, Cash

To Purchase Tickets please  
call Michelle Agard  
at 416-666-6179 or email at  
fishous\_99@yahoo.ca

Participants must be 19 years of age or older to board coaches bound for Casino Rama. Valid government-issued photo identification required.

Do you have an idea for a Lupus Ontario Event?

Would you like to organize an event for a friend,  
family member or co-worker that has lupus?

Please call Lupus Ontario at 905-415-1099 | 1-877-240-1099

Or email: [jbutler@lupusontario.org](mailto:jbutler@lupusontario.org)

*Together We Can Conquer Lupus!*





**CHARITY GOLF**  
**TOURNAMENT 2017**

**First edition for the benefit of**  
**Lupus Ontario**

**WHEN: September 9, 2017**

**WHERE: Casselview Golf Club**

**COST: 105\$ golf, cart and dinner**  
**35\$ dinner only**

**50/50 Draw and Door Prizes**  
**Join in the fun for a good cause!**

**FOR REGISTRATION**

**Contact**  
**Isabelle Souligny**  
**613-872-2924 or**  
**[isabelle.souligny@gmail.com](mailto:isabelle.souligny@gmail.com)**

# WALK FOR LUPUS ONTARIO



## Recruiting Walkers Walk for Lupus Ontario

Walk for Lupus Ontario is Lupus Ontario's single most important annual fundraising and public awareness event. Walk for Lupus began fourteen years ago with a small walk in Ontario on thanksgiving weekend and has now grown to many walks across Ontario in 2016. Each year we have seen funds more than double! This enables us to improve the lives of those living with Lupus.

This year, Lupus Ontario will be celebrating its **16th Annual** Walk for lupus Ontario. The event is a chance for patients, families, friends and the community to come together to raise money and awareness while walking in support of lupus. There are many ways you can support Walk for Lupus Ontario.

- Join a walk and collect pledges
- Support a walker
- Sponsor a walker
- Volunteer at an event
- Become a coordinator and plan your own walk

**Please visit [www.walkforlupusontario.org](http://www.walkforlupusontario.org) to find a walk near you!**

**Contact Juanita Butler, Events Coordinator for more information:**

**Phone: 905-415-1099    Toll Free: 1-877-240-1099**

**E-mail: [info@lupusontario.org](mailto:info@lupusontario.org)**

***Take a step to conquer lupus***



**10-25 Valleywood Road**

**Markham, ON L3R 5L7**

**Tel: 905-415-1099**

**Toll Free: 1-877-240-1099**

**[www.lupusontario.org](http://www.lupusontario.org)**

**Charitable # 88333 1472 RR0001**



# 11th Annual Durham Walk for Lupus

Written by: Laura Piccione

Lupus is known as 'the disease with a thousand faces' because its symptoms vary so much from person to person and change so much over time that it mimics so many other disorders.

Located along the vista of Lake Ontario, Lupus Ontario launched their new logo in Durham to mark the 16th annual walk across Ontario. This year marked the 11th annual Durham Walk for Lupus in support of Lupus Ontario which took place on Saturday June 3rd 2017 at Ajax Rotary Park. With the help of many Durham Lupus Support group members, family and friends, as well as our fantastic student volunteers from Ajax High School, R.S. McLaughlin CVI, Monsignor Paul Dywer Catholic High School and Durham Attack Volleyball 14U Energy, the event helped raise public awareness and the funds raised will help support education and research, as well as support programs and initiatives to improve the quality of lives for those living with Lupus.

The Master of Ceremony, Kevin McGill opened the ceremony by introducing the Ajax-Pickering MPP, Honourable Joe Dickson and Lupus Ontario President, Linda Keill. All in attendance were humbled by the Honourable Joe Dickson's motivational words and his grace and humour. The Honourable Joe Dickson, along with Kathryn Stewart, who has been living with Lupus since the age of thirteen, cut the ceremonial ribbon releasing a sea of purple onto the waterfront trail along Ajax.

Student volunteers and members and family from the Durham Lupus Support Group met early in the morning to prepare for the day as they set up tables, hung signs, blew up balloons, assembled tents and games for Lupie Land and even sampled some of the fresh coffee donated by Ajax Starbucks. The event could not have been possible without the generous commitment from walk coordinators Laura and Rob Piccione and Sandra Williams-Reid, who spent countless hours promoting the event and canvassing for donations for the raffle. Ashley was also an integral asset for securing donations and she also took some fantastic photographs that day. Mike and Elizabeth Stewart were a huge help as they loaded the truck and transported all the necessary equipment needed for the event; Rachel also assisted with loading up the truck and Grace with unloading the truck at the end of the day. Layton and Jeff woke up early to assist Rob with setting up, hanging signs and creating the balloon archway. Dave, longtime volunteer and our other awesome photographer, captured many happy smiles as walkers enjoyed the day. Thank you to Amanda for hosting Joe Dickson and media contacts. Other loyal and dedicated volunteers who have committed countless hours over the years once again came out to help make the event run smoothly. Registrants were greeted by the efficiency of Karen, Mimi, Sara and Amanda. Raffle volunteers Sandra, Heron, and Lucy showcased the amazing donations from the community. Yummy baked goods were provided by Wickedly Rare Treats, Joanne, Kathryn, Gail and Carole, and shortbread butterfly cookies by Dierdre's.

Local Ajax community leaders joined in to support the event through generous donations such as fresh fruit and water from Tom's NoFrills, the Ajax Food Basics and the Ajax CostCo to raffle donations from Archibald's Estate Winery, Brimacombe Oshawa Ski Club, Buffalo Wild Wings, Cedarhurst Golf Club, Cineplex Odeon, Glenn Imperial, Hands to Massage Therapy, Home Depot, The Keg Restaurant, Loose Endz the Salon, Nutcracker Sweets, Randa Menswear, Retro Burger, Rock Oasis, Shannon Crawford, Twist Performance & Wellness, Valentino's Grande Hair Salon and Van Belle Flowers.

Thank you to our generous sponsors Industrial Alliance, Royal Canadian Legion branch 322 in Ajax, and Michael Boyer Chevrolet -Buick GMC Ltd in Pickering.

The Durham Walk raised \$18,781.01! All proceeds go to Lupus Ontario. For more information on lupus, please visit the Lupus Ontario website at: <http://www.lupusontario.org>. Many thanks to everyone for their support! We will see you next year at the 12th Annual Durham Walk for Lupus on Saturday June 2, 2018!



# Anti-dsDNA

**Also known as:** Antibody to ds-DNA; Native double-stranded DNA Antibody; anti-DNA; Double stranded DNA Antibody

**Formal name:** Anti-double-stranded DNA, IgG

## Why Get Tested?

To help diagnose and monitor [lupus \(systemic lupus erythematosus, SLE\)](#)

## When to Get Tested?

When you have a positive [ANA test](#) and signs and symptoms associated with lupus, such as persistent fatigue and weakness, arthritis-like pain in one or more [joints](#), a red rash resembling a butterfly across the nose and cheeks, and/or skin sensitivity to light; periodically when you have been diagnosed with lupus

## Sample Required?

A blood sample drawn from a vein in your arm

## Test Preparation Needed?

None

## The Test Sample

### What is being tested?

Anti-double stranded DNA antibody (anti-dsDNA) is one of a group of [autoantibodies](#) called [antinuclear antibodies \(ANA\)](#). Normally, antibodies protect against infection, but autoantibodies are produced when a person's [immune system](#) fails to adequately distinguish between "self" and "non-self." They mistakenly attack the body's own healthy cells, causing tissue and organ damage. Anti-dsDNA specifically targets the genetic material ([DNA](#)) found in the [nucleus](#) of a cell, hence the name "anti-dsDNA." The anti-dsDNA test identifies the presence of these autoantibodies in the blood.

While anti-dsDNA may be present at a low level with a number of disorders, it is primarily associated with [lupus](#). Lupus is a [chronic](#) inflammatory [autoimmune disorder](#) that can affect various tissues and/or organs of the body such as the kidneys, [joints](#), blood vessels, skin, heart, lungs, and the brain. (For more on this, read the article on [Lupus](#)). The test for anti-dsDNA, along with other autoantibody tests, may be used to help establish a diagnosis of lupus and distinguish it from other autoimmune disorders.

One serious complication of lupus is lupus nephritis, a condition characterized by inflammation of the kidneys, which can lead to [protein in the urine](#), [high blood pressure](#), and [kidney failure](#). It occurs when the autoantibodies bind to [antigens](#) and become deposited in the kidneys. In the evaluation of someone with lupus nephritis, a high level ([titer](#)) of anti-dsDNA is generally associated with ongoing inflammation and damage to the kidneys.

## How is the sample collected for testing?

A blood sample is obtained by inserting a needle into a vein in the arm.

## Is any test preparation needed to ensure the quality of the sample?

No test preparation is needed.

Continue on pg. 9



## Anti-dsDNA, cont'd.

### The Test

#### How is it used?

The anti-double stranded DNA (anti-dsDNA) test is used to help diagnose [lupus \(systemic lupus erythematosus, SLE\)](#) in a person who has a positive result on a test for [antinuclear antibody \(ANA\)](#) and has clinical signs and symptoms that suggest lupus.

Anti-dsDNA is one of a group of [autoantibodies](#) called antinuclear antibodies that are produced by a person's [immune system](#) when it fails to distinguish between "self" and "nonself." ANA target substances found in the [nucleus](#) of cells. Anti-dsDNA specifically target the genetic material ([DNA](#)) found in the nucleus, causing organ and tissue damage. The presence of anti-dsDNA in the blood is strongly associated with the [autoimmune disorder](#) lupus.

Typically, an ANA test is the first test performed to evaluate an individual for an autoimmune disorder. While a positive ANA test is seen in about 95% of lupus cases, it may be seen in many other conditions as well. The anti-dsDNA test is fairly specific for lupus; however, only 50-70% of people with lupus may be positive; that is, a negative anti-dsDNA does not rule out lupus. If a person has a positive ANA, an anti-dsDNA test may be used to distinguish lupus from other autoimmune disorders that have similar signs and symptoms.

An anti-dsDNA test may be ordered along with a test for anti-Smith (Smith antibody), another antinuclear autoantibody associated with lupus, to help establish a diagnosis. The anti-Smith test may be ordered as part of an [extractable nuclear antigen \(ENA\) panel](#). Depending upon clinical signs and the health practitioner's suspicions, other autoantibodies may also be ordered to help distinguish between, and rule out, other autoimmune disorders. Examples include tests for [histone antibody](#) (drug-induced lupus) and [antiphospholipid antibodies](#).

The anti-dsDNA test may be used to monitor the severity of the disease in a person who has been diagnosed with lupus. Those with lupus often have flare-ups in which symptoms worsen and then subside. An increased anti-dsDNA level may be seen prior to and during these flare-ups. In particular, this test may be used to monitor lupus nephritis, a serious complication of lupus that can cause kidney damage and inflammation. This can lead to [protein in the urine](#), [high blood pressure](#), and [kidney failure](#). It occurs when the autoantibodies bind to antigens and become deposited in the kidneys.

#### When is it ordered?

An anti-dsDNA test is ordered when a person shows [signs](#) and [symptoms](#) that could be due to [lupus](#) and has had a positive [ANA test](#), especially when the result of the ANA test presents as a "homogeneous" or "speckled" fluorescent pattern. (See the article on [ANA](#) for more on this.)

Continued on pg. 10



Walk and raise money for Lupus! Our walks have helped raise over \$1,995,000.00 over 15 years for research, support and awareness. Join our local walk in your area and make every step count to a life without Lupus.

Register and Walk today!

[www.walkforlupusontario.org](http://www.walkforlupusontario.org)

## Anti-dsDNA, cont'd.

Examples of some signs and symptoms of lupus include:

- Muscle pain
- Arthritis-like pain in one or more [joints](#) (but no or little joint damage)
- Red rash that frequently resembles a butterfly across the nose and cheek areas (malar rash)
- Low-grade fever
- Persistent fatigue, weakness
- Skin sensitivity to light
- Hair and weight loss
- Numbness or tingling in the hands or feet
- Inflammation and damage to organs and tissues, including the kidneys, lungs, heart, lining of the heart, [central nervous system](#), and blood vessels

The anti-dsDNA test may be ordered periodically to monitor progress of the disease or flare-ups in a person who has been diagnosed with lupus. It may be repeated when an initial test result is negative but clinical signs and symptoms persist and lupus is strongly suspected.

### What does the test result mean?

The results of an anti-dsDNA test are usually considered together with a person's medical history, signs and symptoms, and results of other [autoantibody tests](#).

A high level of anti-dsDNA in the blood is strongly associated with [lupus](#) and is often significantly increased during or just prior to a flare-up. When the anti-dsDNA is positive and the person tested has other clinical signs and symptoms associated with lupus, it means that the person tested likely has lupus. This is especially true if an [anti-Sm test](#) is also positive.

In the evaluation of someone with lupus nephritis, a high level ([titer](#)) of anti-dsDNA is generally associated with ongoing inflammation and damage to the kidneys.

A very low level of anti-dsDNA is considered negative but does not exclude a diagnosis of lupus. Only about 50-70% of those with lupus will have anti-dsDNA.

Low to moderate levels of the autoantibody may be seen with other [autoimmune disorders](#), such as [Sjögren syndrome](#) and mixed connective tissue disease (MCTD).

Continue on pg.11



**Shoppers Drug Mart** offers a charity initiative that can greatly benefit Lupus Ontario.

You can donate some or all of your Shoppers Optimum Points to Lupus Ontario. This will help us purchase merchandise at Shoppers Drug Mart such as office supplies and fundraising items. Please click [here](#) to find out how you can help.



## Anti-dsDNA, cont'd.

### Common Questions

#### **1. Why might it take a long time to be diagnosed with lupus?**

A health practitioner must rely not only test results, but on clinical symptoms and the person's history for a diagnosis. Symptoms may be nonspecific and often come and go. Test results may not initially be positive for some of these autoantibodies due to the cyclic nature of autoimmune disorders. In some cases, it may take months or years to show a pattern that might suggest lupus or any of the other autoimmune diseases.

#### **2. If I have been diagnosed with lupus, will it ever go away?**

There is no cure for lupus, but the symptoms and complications can be managed. Most people with the condition will experience flare-ups, but most will also have periods of few or mild symptoms.

#### **3. Will my anti-dsDNA ever go away?**

No, once the autoantibody has been produced by the body, it will continue to be present. However, the concentration in the blood will vary over time and can be present at very low levels.

#### **4. Is there anything I can do to affect my anti-dsDNA level?**

Autoantibodies do not respond to lifestyle changes because they reflect the presence and severity of an autoimmune process.

#### **5. Can the anti-dsDNA test be performed at my doctor's office?**

The test requires specialized equipment. Your sample will need to be sent to a laboratory that performs these tests.

#### **6. Should everyone have an anti-dsDNA test done?**

Autoantibody testing is only necessary when a person shows symptoms that suggest an autoimmune disorder. Most people will never need to have an anti-dsDNA test performed.

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## Thank You!



Keeping busy for the summer is very important for Savannah Lebeau, 9 (left) and her sister Tanje Lebeau, 7. They understand that their dear aunt, Josée Morris, is living with lupus so they decided to raise funds to help further lupus research and education. With the help from their mother, Sue Lebeau, they raised this money by canvassing their friends and by hosting a bake sale at their home. Savannah and Tanje both attend St. Thomas D'Aquin School in Astorville, Ontario. Can't wait to see what else they have planned for Lupus Ontario in the future. In total they raised \$272.10.

On behalf of Lupus Ontario's Board of Directors, Staff and Volunteers, THANK YOU! Because of your commitment and hard work, this donation will help us get closer to one day finding a cure.

# EASY RECIPES

## Watermelon Pizza



Bite into a slice of summer with this easy, no-carb dessert.

**Prep Time:** 5 mins

**Cook Time:** 0 mins

**Total Time:** 10 mins

### Ingredients:

- 1/2 cup ricotta
- 1/4 cup softened cream cheese
- 1 tbsp. honey
- 1/2 tsp. vanilla
- Watermelon slice, 1" thick
- Fresh berries, for garnish
- Fresh mint for garnish
- Toasted coconut, for garnish

### Directions:

1. In a small bowl, mix ricotta, cream cheese, honey, and vanilla together until combined.
2. Spread mixture onto slice of watermelon and top with berries, mint, and toasted coconut. Serve immediately.

### Courtesy of:

<http://www.goodhousekeeping.com/food-recipes/a39347/watermelon-pizza-recipe/>

By: The Good Housekeeping Test Kitchen, Photo courtesy of Mike Garten

## Vegan Chickpea Curry Stew



### Ingredients

- 2 tbsp. extra virgin olive oil
- 1 cup onion, small diced
- 1/2 cup carrot, grated
- 1/4 cup celery, sliced thinly
- 2 tbsp. fresh garlic, minced
- 1 tbsp. garam masala
- 1 tsp. turmeric
- 1 (19 oz) can chickpeas, rinsed and drained
- 2 tomatoes, small diced
- 1 tbsp. lime juice
- 3/4 cup coconut milk

### Directions:

Sauté onion, carrot and celery in the oil over medium-high heat, until the onions start to soften and become golden brown. Reduce heat to medium and add garlic, garam masala and turmeric. Cook for 5 minutes. Add chickpeas, tomatoes and lime juice. Lower heat and simmer for 10-15 minutes. Add coconut milk and simmer for an additional 10 minutes. Add a little water if you would prefer a more "wet" consistency. Yield: 2-4 servings. Optional: Serve with a dollop of coconut cream.

**Recipe source:** [everydayrecipes.ca](http://everydayrecipes.ca) / Downhome magazine.



## WALK FOR LUPUS ONTARIO;

- ⇒ Become a Walk Coordinator
- ⇒ Join a Walk
- ⇒ Make a Donation to a Walk
- ⇒ Create a Walk in Your Area
- ⇒ Corporate Sponsorship
- ⇒ Company Product Donations

Call Lupus Ontario for more information  
1-877-240-1099 | 905-415-1099

If you have a favourite recipe you would like to share in a future Lupus Link newsletter,  
Please email your recipes to Juanita Butler at [info@lupusontario.org](mailto:info@lupusontario.org)



## Upcoming Events in Support of Lupus Ontario

September 9 - Casino Rama "Getting Lucky for Lupus" Bus Trip

September 9 - Golf for Lupus, Castleton, ON

March 3, 2018 - Italian Dinner, Dance and Silent Auction

### A Great Night Raising Funds for Lupus Research!

Lupus Ontario hosted their 31st Annual Italian Dinner, Dance and Silent Auction on March 4, 2017 at the Riviera Banquet Hall located at 2800 Highway 7 W, Vaughan, Ontario. It was the best year yet raising over \$40,000 for lupus research. We had 500 guests.

Starting with the Antipasto Bar, followed with a 3-course Italian Dinner and desserts so scrumptious it leaves you wanting more. DJ provided by Variation Music. Toe tapping, get on the dance floor, move to the mood of the music.

Gloria Checkley was given the Donna Chu's Presidents Choice Award for the most outstanding volunteer for Lupus Ontario. Dr. Julie Couture was accepted for the Geoff Carr Fellowship - The Lupus Ontario Geoff Carr Fellowship is offered annually to a qualified candidate to work under supervision at an accredited lupus clinic in Ontario. Anastasia Koutsidis was given the Special Volunteer Award. She has been a long-time member and her years of unwavering commitment, and compassion was recognized. Melissa Alexander gave a speech about her life with lupus that, at the end, had a standing ovation and everyone in tears.

Fantastic Silent Auction items were available that made bidding for what you wanted fun and exciting. There were also fabulous raffle items including a 54" Smart TV, a Las Vegas trip, Westjet Airline tickets to anywhere in the world and so much more and a 50/50 draw. Door Prizes, that included the traditional "Big Salami".

Save the date for 2018 – The 32nd Annual Italian Dinner, Dance and Silent Auction will take place on March 3, 2018.

Visit [www.lupusontario.org](http://www.lupusontario.org) for more information about lupus. You can also call Lupus Ontario at 905-415-1099 or toll free 1-877-240-1099. If you suspect you may have lupus, speak with your doctor.



## In the heart of systemic lupus erythematosus

Written By: Dr. Kostas Tselios

Heart involvement in lupus is multifactorial and may affect most patients during their lifetime. Pericarditis, an inflammation of the two-layered sac that surrounds the heart, is the most common manifestation and is detected in 11-54% of the patients during disease course. This will lead to fluid accumulation within the sac (between its two layers) and compromise heart function if the fluid collection is sizable. It manifests with chest pain (retrosternal or precordial) and discomfort and is frequently accompanied by dyspnea (shortness of breath), palpitations (fluttering) or fatigue. Most commonly, the pain is relieved when leaning forward. Secure diagnosis is achieved with echocardiogram (ultrasound), which can roughly estimate the severity of the inflammation by the volume of the pericardial fluid and assess its impact on heart function. Rarely, pericarditis may have other causes (viral, tuberculosis, end-stage renal disease etc) that should not be overlooked. Apart from the extreme cases of cardiac tamponade (massive fluid collection causing chest pain and severe dyspnea), which requires acute and invasive management, glucocorticoids (prednisone) and non-steroidal anti-inflammatory drugs (NSAIDs) are considered by most rheumatologists as the first choice. If symptoms persist other drugs may be used as well, such as antimalarials, colchicine, azathioprine, mycophenolate mofetil or methotrexate.

Inflammation of the myocardium (the heart muscle) affects approximately 3-9% of lupus patients. Typical clinical features include chest pain with tachycardia (rapid heart beat), palpitations and/or symptoms of heart failure (shortness of breath, lower limb swelling). The latter occurs due to the inability of the heart to pump the blood efficiently. Diagnosis may be challenging and includes both blood and imaging tests, such as echocardiogram, cardiac MRI and even PET (positron emission tomography), a novel rather sensitive technique. In selected cases, biopsy of the heart may be indicated. Treatment of lupus myocarditis consists of glucocorticoids in high doses or even intravenously. In most cases, immunosuppressive drugs, such as cyclophosphamide, azathioprine and mycophenolate mofetil are given in combination with prednisone. Supportive treatment with other medications, such as diuretics, is also recommended to minimize the work required from the heart until its recovery.

Valve disease is detected in almost 50% of the patients; however, it is clinically meaningful (causing symptoms and requiring therapy) in about 5%. Its direct link to lupus is uncertain. The most characteristic valvulopathy is Libman-Sacks endocarditis. Diagnosis is based on echocardiogram to visualize the valves and the abnormal tissue around them. It has been associated with certain antibodies found in the blood and may be complicated with acute embolic infarcts, mainly cerebral (stroke). Therapeutic approach remains controversial and may consist of glucocorticoids and anticoagulation (blood thinners). About one fifth of these patients will require surgical management with valve replacement.

Accelerated atherosclerosis has a tremendous impact on lupus patients. Contrary to the previous manifestations (pericarditis, myocarditis), this complication becomes particularly relevant in the late stages of the disease. Pioneering studies from the Toronto Lupus Clinic in the '70s showed that atherosclerosis was the major cause of death late in disease course. Subsequently, it was shown that 30% of deaths were attributed to coronary artery disease (blocked or narrowed arteries of the heart). Pre-menopausal women with lupus have a 50-fold increased risk for myocardial infarction (heart attack) as compared to healthy women of the same age. It is estimated that about 10% of all lupus patients will suffer an atherosclerotic cardiovascular event (heart attack or stroke) in an average time of 9 years from diagnosis. Traditional risk factors, such as arterial hypertension (high blood pressure), diabetes (high glucose), dyslipidemia (high cholesterol) and smoking are involved in the atherosclerotic process. However, disease-related factors such as chronic inflammation and certain autoantibodies contribute further. Moreover, glucocorticoids aggravate atherosclerosis, mainly through the augmentation of pre-existing risk factors (hypertension, diabetes, increased body weight). On the contrary, antimalarials (Plaquenil® and chloroquine) are protective against cardiovascular events and associated with a favorable lipid profile. They also reduce the rate of thrombosis (blood clots) and the need for prednisone.



Based on their multiple beneficial effects, antimalarials are recommended for virtually all lupus patients. About 70-80% of them are taking these drugs for prolonged periods, if not for life. Eye monitoring every 6-12 months is mandatory to eliminate the possibility of serious toxicity. Apart from that, antimalarials may cause a specific form of heart disease. This has been reported in sporadic cases around the world; actually about 45 patients in the last 50 years. However, latest research from

the Toronto Lupus Clinic challenges this belief. By using a single blood test, we were able to detect patients at high risk for this complication. Further investigations with cardiac MRI and, occasionally, heart biopsy confirmed diagnosis in a series of patients, all of whom were taking antimalarials for more than 10 years. Some of them were diagnosed in asymptomatic stages; investigations were triggered by the abnormal blood tests. This disease causes heart failure (shortness of breath, lower limb swelling etc) or arrhythmias (irregular heart beat) and syncope and has a mortality rate of approximately 43%. In our patients, prompt discontinuation of the drug led to gradual improvement of heart function after many months and improved survival. Further research is under way to delineate the optimal diagnostic and therapeutic approach to such patients.

In conclusion, antimalarials are beneficial for most lupus patients and still are the cornerstone of long-term management. However, we need to remain vigilant regarding heart complications and, probably, establish a regular monitoring schedule for heart structure and function, particularly for patients who are taking these drugs for prolonged periods.



# BRAIN GAMES

**Introduction—Solve This Murder** This file is licensed by [nhorton87](#) under the [iSLCollective Copyright License](#)

Mr. James Mulligan, millionaire and owner of Telecom, Inc., a multi-billion dollar telecommunications company was found dead in his private office in his home at 8:20pm last night. He had been stabbed through the heart by a sharp object. When he was found he was sitting at his desk with a pen in one hand.

He had invited several guests for the weekend to watch the shooting stars at his country home. Present were:

Mrs. Mulligan, his wife, Mr. David Johnson, his best friend, Mrs. Susan Johnson, the wife of David Johnson, Steve Holcombe, Mr. Mulligan's lawyer, Brad Hartley, the President of TeleCom, Inc., and Sarah, the maid.

## The Clues

Read each clue one at a time and think about why it is important before moving on to the next clue. See if you can solve the mystery of who killed Mr. Mulligan.

- 1) Mr. Mulligan collected old weapons and hung them on his office wall. One sword was missing when he was found.
- 2) Dinner ended at 7:30pm, at which point everyone went out to the balcony to watch the shooting stars. Sarah went to the kitchen to wash the dishes and she stayed there until 8:15pm when she heard the lawyer shouting and came running to see what had happened.
- 3) At 7:35pm, Mr. Mulligan and his lawyer left the balcony saying they had some private business. They went directly to Mr. Mulligan's private office.
- 4) At 8:15, everyone heard the lawyer shouting and they ran from the balcony to find him banging on Mr. Mulligan's office door which was locked. Mr. Hartley broke down the door and everyone saw the body.
- 5) The lawyer had been stealing money from the company and had about \$5 million in a secret Swiss bank account.
- 6) The lawyer said that at about 8pm, he had left Mr. Mulligan's office to go to the bathroom. After that he went to the kitchen to ask Sarah for a glass of wine. He returned to the office at 8:15 to find it locked and immediately began banging on the door and shouting for Mr. Mulligan to open the door.
- 7) Police found a note in Mr. Johnson's pocket. It read, "I'm sorry, darling. James and I have been seeing each other for a year or so now. But I'm going to end it tonight. Please forgive me..."
- 8) Dinner had been a bit late because no one could find Mr. Johnson or Mrs. Mulligan. After 15 minutes, they both came down together. Mrs. Mulligan's face was red.
- 9) The missing sword was found in Mr. and Mrs. Mulligan's bedroom.
- 10) Sarah told police that she had told Mrs. Mulligan once that Mr. Mulligan may have another woman. Mrs. Mulligan said, "If I ever find out, I'll kill him."
- 11) Mr. Johnson had been in love with Mrs. Mulligan many years ago, but Mr. Mulligan proposed to her first.
- 12) A piece of blue cloth was found in Mr. Mulligan's office.
- 13) Mrs. Mulligan spilled her red wine when everyone moved from the dining room to the balcony. It went all over the floor.
- 14) Mr. Mulligan had recently started talking about how he should use his money to do good in the world, instead of just making more money.
- 15) Only Mr. Hartley, Mrs. Mulligan and Mr. Johnson were wearing blue.
- 16) The balcony had two doors—one led to the dining room and the other led to Mr. and Mrs. Mulligan's bedroom.
- 15) Mr. Mulligan had called Mr. Hartley and said that he was going to make big changes to the company soon.
- 17) Although Mr. Mulligan was found with a pen in his hand, no paper was found on the desk or near it.
- 18) Police found red stains in the carpet in the bedroom. They led from the balcony door to the middle of the western wall.
- 19) Mr. Mulligan's office was located on the west side of his bedroom.
- 20) The CEO stood behind everyone else during the shooting star show and no one remembered him speaking or reacting at all to the stars.
- 21) A little before 8:15, Mrs. Mulligan heard Mrs. Johnson crying and turned around to give her a handkerchief. Mrs. Johnson was patting Mr. Johnson's back and saying, "I'm sorry."
- 22) Mr. Mulligan had once called Mr. Hartley to ask him if he knew any architects who could build secret doors.

**Solution—**Mr. Mulligan was killed by the CEO, who suspected that Mr. Mulligan was going to ruin the company. Mr. Hartley knew about the secret door between the bedroom and the office, so when Mrs. Mulligan and the Johnsons were distracted by the shooting stars, at about 8pm, he slipped through the bedroom door from the balcony and opened the secret door to the office. He saw that Mr. Mulligan was writing documents to close Telecom, Inc. and open a charity. Afraid he would lose his job, Mr. Hartley grabbed a sword off the wall and stabbed Mr. Mulligan through the heart and then stole the paper. He locked the door, left through the secret door and quietly came back on the balcony, just in time to hear the lawyer return and start shouting.

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