Systemic Lupus Erythematous with Vasculitis

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Introduction

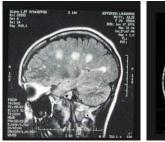
Presenting a case of an unconscious patient with all features of leptospirosis with IgM positive later turned out to be systemic lupus erythematous vasculitis and responded to steroids.

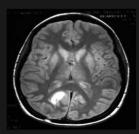
Systemic lupus is erythematous with vasculitis – A 45-year-old man was brought to the emergency, unconscious and high fever for 60 days with cutaneous lesions (Fig 1). All tests were negative except lgM for leptospirosis. He was given doxycycline and ceftriaxone with no improvement. Then he had a course of crystalline penicillin with no response. His general condition deteriorated and a CT brain and later MRI revealed features of vasculitis (Fig 2 and 3).

The skin lesions were mimicking livedo reticularis (Fig 4). So, a skin biopsy was done which revealed Vasculitis and the vasculitis package revealed SLE with Anti DNA came as positive. With the commencement of steroids, he became conscious and all vital parameters came to normal.



Figure 1: Skin Lesions





Figures 2 & 3: MRI Brain Vasculitis



Figure 4: Livedo Reticularis

Leptospirosis can mimic SLE in all aspects except the skin lesions whether there is added leptospirosis in this patient cannot be dismissed. He was discharged with vitals safe. (Fig 5)



Figure 5: Recovered After Steroids

Conclusion:

SLE an autoimmune disease with multiorgan involvement is highly fatal. It can mimic many cases of septicemia with multiple organ involvement. If early diagnosis and treatment are not given on time it is a fatal disease. No response to treatment, MRI findings and skin lesions gave a clue and after appropriate treatment, he recovered.