

Vet's Corner – Discoid Lupus Erythematosus



This is a disease of the immune system that has the most visible impact on the nose. The exact cause is unknown but is the second most common immune skin disease seen in vet practice. Only very rarely will a dog with DLE develop systemic (internal) signs leading to a condition called Systemic Lupus Erythematosus (Lupus).

Exposure to sunlight can cause clinical signs to become worse in some dogs but not all, and thus improve with UV protection. There are also certain breeds that have a predisposition to develop the disease and this is likely through genetics.

Initially there is loss of colour (de-pigmentation), reddening and scaling to the nose. Ulcers and crusts/scabs then start to develop and can extend into the surrounding haired area. There can sometimes also be loss of colour around the eyes and lips although this is less common. The nose starts to lose its "cobblestone" appearance and becomes smooth.

DLE should not be confused with Pemphigus Foliaceus (PF) which is the

most common immune skin disease seen. PF also involves de-pigmentation to the nose, but unlike DLE, there is crusting to the muzzle, around the eyes, and ears.

The feet, footpads and groin are also commonly affected. Thus the clinical signs are more generalised than with DLE and can lead to pain, itching and lethargy. It does not however become internal. Sometimes just the feet are affected, often leading to thickened footpads.

Diagnosis can be made for both skin diseases by taking a sample of the affected skin under sedation or general anaesthetic (biopsy) and histology performed at a specialised laboratory.

Treatment for DLE consists of UV protection or better still sun avoidance, particularly during the middle part of the day. Topical corticosteroid creams can help, and vitamin E orally or as a cream. Treatment is for the life of the dog with the disease often having periods of improvement and then getting worse.

Treatment for PE however is more intensive, consisting of corticosteroids and other immune drugs depending on response to treatment.

The frustrations of skin disease: "They say dermatologists never lose a patient, they never die and they never go away". ■

Lynne Robinson BVSc

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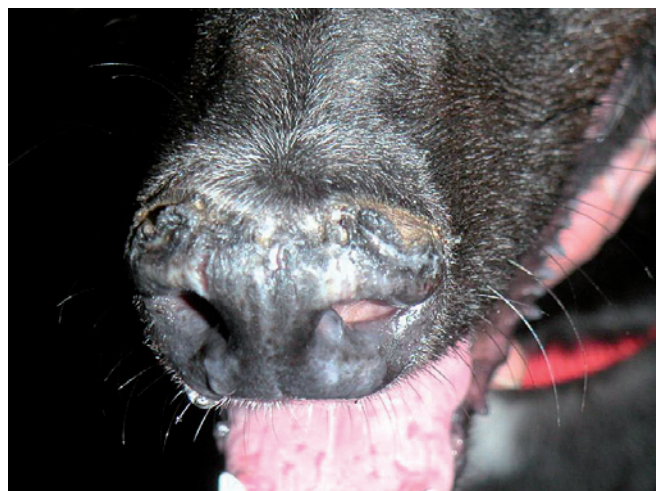


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DLE starting to affect Cilla's nose with scabs forming.