



Dermatology for Animals

SKIN AND EAR CLINIC

p: 07 3359 0777
p: 1300 A SKIN VET
e: dfa@live.com.au
w: www.skinvet.com.au

Discoid Lupus Erythematosus (DLE)



Discoid lupus erythematosus (DLE) is an autoimmune disease (i.e. where the body's immune system attacks itself). The most common site affected is the nose, although this can spread to involve the lips, around the

eyelids, over the muzzle and sometimes the perianal skin and feet. Unlike DLE in people it does NOT develop into systemic disease affecting other organs, but remains restricted to the skin.

KEY POINTS

DLE is an "Autoimmune" disease. i.e. the body is attacking itself.

Clinical signs are variable, ranging from loss of pigment through to severe erosion, ulceration and crusting.

The most commonly affected area is the nose, although the anus and other mucosal surface may also become involved.

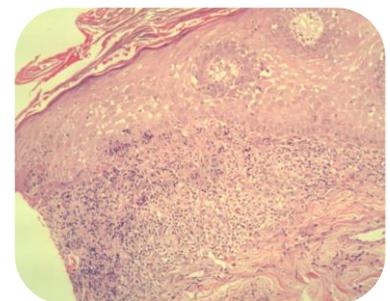
Whilst the trigger of the disease is unclear UV light is known to play a vital role in both the initiation and perpetuation of the disease.

There is a range of treatment options ranging from topical to systemic medication but UV avoidance is **CRITICAL**.

What causes it to develop?

Unfortunately it is not clear what causes the body's own immune system to "go rogue" and start to target the skin, but exposure to ultraviolet light is known to cause exacerbation in the severity of disease.

Once triggered a band like layer of cells lines up below the outer layer of skin, damaging the basal layer and leading to depigmentation first and then erosion, ulceration or crusts.



Clinical signs and Diagnosis

The earliest and mildest sign of the disease is depigmentation of the affected skin. This initially has the appearance of being grey rather than the usual dark brown or black. With time and increased damage to the basal layer of the skin there is atrophy (thinning) and loss of the normal "cobblestone" of the nose. The lesions may progress to show superficial erosion to deep ulceration.

It is important to note that other diseases may mimic a lot of the lesions seen in DLE, but require very different treatment regimes. For this reason a [biopsy](#) is required to confirm the autoimmune nature of the disease before treatment is started.



Early lesion showing depigmentation



Erosion and crusting



Crusting around eyelids



Perianal / mucosal inflammation

Treatment



Before

There is a range of treatment options available to treat this condition and the choice depends on a variety of factors including the severity of disease, how easy it is to administer medication to your pet, response to therapy and potential side effects of medication.

Each pet must be assessed on an individual basis and the most appropriate medication or combination of medications is then selected following close consultation and discussion with you.



After

Sun avoidance strategies



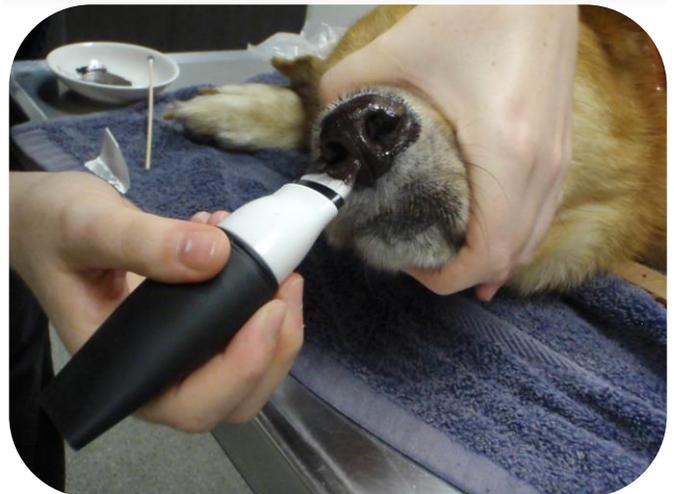
Nose cap in place



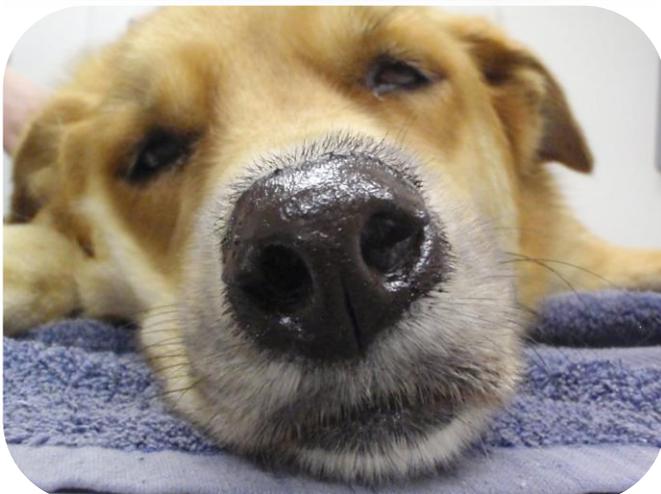
Nose cap



Lesion prior to NuNose application



Applying NuNose



After application

Regardless of the individualised treatment program that is developed for your pet, sun avoidance is VITAL for long-term management as it plays such a critical role in triggering and potentiating the disease symptoms. Whilst sunscreens are important, unfortunately many animals will not tolerate them and the need to constantly reapply severely limits their effectiveness. To overcome this nose caps may be used and we have also developed NuNose, which is a long lasting, pigmented protective film, that bonds to the skin for up to 10 days.