

## Elderly-Onset Lupus Complicated by Jaccoud's Arthropathy

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## Clinical Image

### 1. Introduction

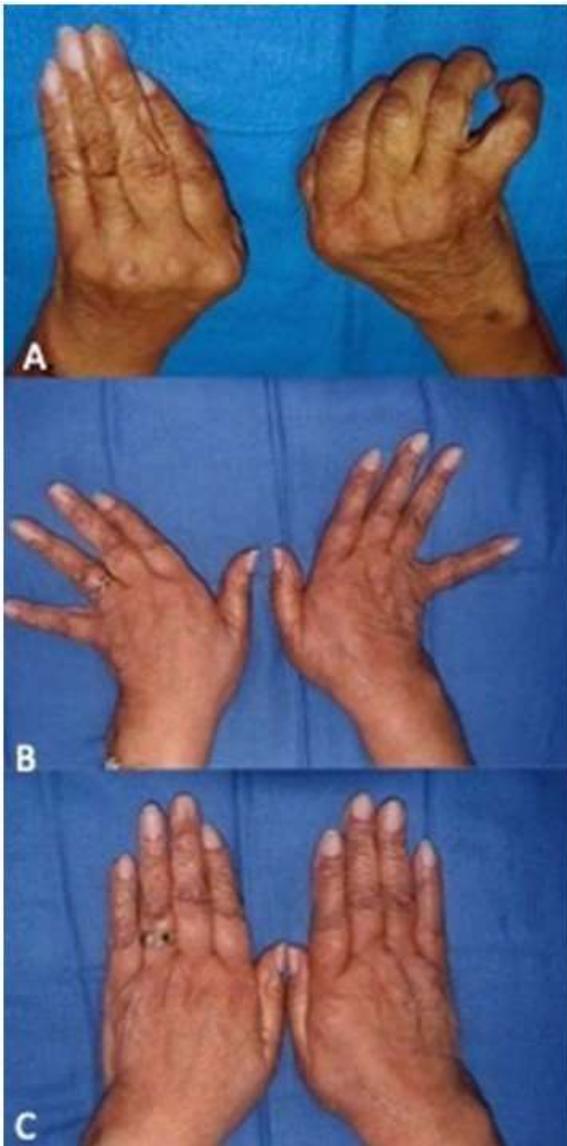
Jaccoud's Arthropathy (JA) is a deforming but not destructive process involving the hands, described originally in rheumatic fever and now known to complicate a number of rheumatologic and non-rheumatologic conditions, particularly lupus, where approximately 5% may be affected [1]. Onset of lupus at age 65 or over is rare, with patients exhibiting mainly cutaneous, hematologic and musculoskeletal features, rarely showing the visceral complications seen in younger patients, like renal disease [2]. An older woman with hand arthritis proved to have a combination of these phenomena.

### 2. Case

A 70 year old woman presented with fatigue, pleurisy, and swollen painful hands. Rheumatoid arthritis was suspected but lab evaluation found normochromic anemia, high titer ANA, and raised antibodies to double stranded DNA. She was treated with hydroxychloroquine but hand deformity progressed. Deformity could be completely corrected by pressure of hands on a firm surface and passive redirection of fingers to a neutral position (Figure). X-rays (not shown) were normal except for the deformity. Braces were constructed to keep her fingers in a neutral position.

### 3. Discussion

Arthritis is the most common presenting feature of lupus. Deforming arthropathies can mimic rheumatoid arthritis, called JA when the patient is negative for rheumatoid factor and anti-CCP, and "Rhupus" when these are positive [3]. Latter cases can develop the typical erosions of RA whereas in JA only the ulnar side of the metacarpal is ever eroded, likely from the chronic pressure of ulnar deviation. Ultrasound has shown bony erosions and synovitis in JA [4], with subclinical synovitis a risk factor for development of JA [5]. Extraskelatal features of lupus are similar whether or not the patient has JA [1]. Orthotic correction of deformity is the mainstay of therapy.



**Figure:** Hands of elderly woman with lupus and Jaccoud's s arthropathy. A. Hands at rest, demonstrating ulnar drift and volar subluxation, worse on right. B. Hands pressed against flat surface, correcting volar subluxation. C. Hands after finger brought passively into neutral position, correcting ulnar drift.

## References

1. Santiago MB, Galvão V. Jaccoud arthropathy in systemic lupus erythematosus: analysis of clinical characteristics and review of the literature. *Medicine (Baltimore)*. 2008; 87: 37-44.
2. Achour A, Mankai A, Thabet Y, Sakly W, Braham F, Kechrid C, et al. Systemic lupus erythematosus in the elderly. *Rheumatol Int*. 2012; 32: 1225-9.
3. van Vugt RM, Derksen RH, Kater L, Bijlsma JW. Deforming arthropathy or lupus and rhus hands in systemic lupus erythematosus. *Ann Rheum Dis*. 1998; 57: 540-4.
4. Ceccarelli F, Massaro L, Perricone C, Pendolino M, Cipriano E, Truglia S, et al. Jaccoud's arthropathy in systemic lupus erythematosus: clinical, laboratory and ultrasonographic features. *Clin Exp Rheumatol*. 2017; 35: 674-7.
5. Piga M, Gabba A, Congia M, Figus F, Cauli A, Mathieu A. Predictors of musculoskeletal flares and Jaccoud's arthropathy in patients with systemic lupus erythematosus: A 5-year prospective study. *Semin Arthritis Rheum*. 2016; 46: 217-24.