

Neonatal lupus

(Neonatal Lupus Erythematosus or NLE)

What is neonatal lupus?

Neonatal lupus is a rare inflammatory condition that develops in unborn and newborn babies of women who carry certain autoantibodies.

Autoantibodies are proteins in the immune system that can mistakenly attack the body's own cells. The autoantibodies that may cause neonatal lupus are known as anti-Ro, anti-La and anti-RNP.

If blood tests show that a mother has these autoantibodies during her pregnancy, there is a 1 to 2% chance that her fetus or newborn baby may develop NLE.

What are the signs and symptoms of NLE?

The most common symptom of NLE is a rash. This rash usually develops on the face and it shows up a few days or weeks after the baby is born. The rash is often triggered by sunlight. This rash is temporary and it usually goes away completely without scarring by six months of age.

Other symptoms of NLE include abnormal blood cell counts or high liver enzymes. These changes develop several weeks after birth. They are rarely serious and usually improve with no treatment after two months.

Very rarely, an abnormal heart beat known as congenital heart block, occurs. Congenital heart block causes a slow heart beat. This condition is permanent and is diagnosed with fetal heart ultrasounds between the 15th and 25th weeks of pregnancy. After they are born, children with congenital heart block may need a pacemaker.

How is NLE treated?

Most babies with NLE do not need treatment. The symptoms of neonatal lupus usually disappear by six months of age and do not leave any lasting effects. Children with neonatal lupus will usually grow and develop normally. They have only a small chance of developing lupus later in life.

If a baby is diagnosed with NLE, what is the chance that future siblings will have NLE?

If a baby has neonatal lupus without congenital heart block, there is a 2 to 4% chance that future siblings will develop NLE.

If a mother already has one child who developed congenital heart block because of NLE, there is a 10 to 15% chance of her future children developing neonatal lupus.

When does the baby of a mother who carries autoantibodies need to visit the Pediatric Rheumatology Clinic?

Here is the usual schedule of visits and tests the baby will need during the first year.

Visit	Baby's Age	Tests
First Visit	6 weeks	Blood tests ECG (electrocardiogram)
Second Visit	3-4 months	Repeat blood tests if abnormal at first visit
Third Visit (optional)	6 months	Repeat blood tests if abnormal at second visit Head ultrasound if needed
Fourth Visit (optional)	9 months	Repeat blood tests if abnormal at third visit
Last Visit	12 months	Repeat blood tests