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A Systematic Review on Belimumab's Effectiveness, Improved Health Outcomes and Quality of Life in Patients with Lupus Syndromes

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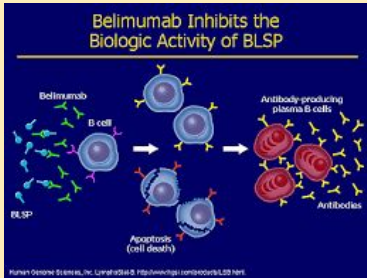
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BACKGROUND

Systemic lupus erythematosus (SLE) is a common autoimmune disease that has a high incidence in women of child-bearing age.

Glucocorticoids are commonly used to manage lupus. Long term glucocorticoid usage is associated with devastating **adverse effects**, so current treatment options aim to mitigate corticosteroids use to improve quality of life.

New management for SLE include biologics such as **Belimumab** which offer improved health outcomes and decreased adverse effects.



SIGNIFICANCE

This research aims to explore the **treatment options** offered for lupus and demonstrate the **benefits of Belimumab** in patients with SLE.

Belimumab, the **first approved biologic therapy for SLE**, is administered intravenously or via self-injection. It **targets B-cells**, reducing disease activity and improving clinical outcomes.

Belimumab should be considered early in treatment regimens for SLE patients to decrease adverse health outcomes and avoid long term side effects from current treatment options.

METHODS

Studies focused on clinical trials, meta-analyses, and systematic reviews regarding SLE treatment, with no exclusions. Mainly studied demographic: **women aged 15-44**. Evaluated short and long-term treatment outcomes, adverse effects, and quality of life changes.

Reviewed data from various sources, including qualitative and quantitative outcomes in SLE research, with no limitations on research designs. Concentrated on US-based clinical trials. Analyzed data to determine effective treatments and assess Belimumab's safety, efficacy, accessibility, and impact on quality of life.

RESULTS

Clinical trials show that **Belimumab is effective at mitigating clinical manifestations of SLE** and **slowing disease progression** while also **decreasing lupus flares** that necessitate **glucocorticoid treatments**. Decreased usage of corticosteroids within SLE management **improves quality of life** by decreasing prevalent adverse effects.

Disease activity was largely quantified by **titers of lupus specific antibodies and concentrations of complement factors**. Additionally, belimumab improved serologic activity in patients with serologically active disease; because of this improvement, patients were able to **reduce corticosteroid use**.

While generally well-tolerated, side effects may include headache, nausea, and increased infections. Belimumab also shows promise as a **complementary treatment following B-cell depletion therapies like rituximab**, potentially reducing lupus exacerbations and anti-dsDNA antibody levels.

DISCUSSION

Accessibility to healthcare, compounded by **diagnostic complexities** and **financial burdens**, presents significant challenges in managing lupus. Policy initiatives, community outreach, and advocacy are essential for addressing these barriers, alongside broader efforts to tackle social determinants of health.

Treatment costs for lupus are substantial, particularly with newer, expensive options like belimumab. While belimumab shows promise in improving health outcomes, its accessibility remains a concern due to high costs.

Early diagnosis and intervention are crucial for optimal management of lupus. While belimumab may not be the first-line treatment, its efficacy and safety profile warrant consideration, especially for patients responding well to rituximab.

FUTURE DIRECTION

Ongoing research into emerging therapies like belimumab is essential for refining treatment strategies and improving outcomes for lupus patients. Collaboration between clinicians, researchers, and patients is key in addressing uncertainties and advancing lupus management.

While Belimumab does not currently hold a primary position in the SLE treatment hierarchy, its well-established efficacy, favorable safety profile, and **positive influence on health outcomes warrant consideration for earlier integration into treatment protocols**. Clinical practitioners are encouraged to judiciously assess patient responses to rituximab treatment, and where improved outcomes are observed, deliberate inclusion of Belimumab in therapy may be indicated.

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