Health Trends Alberta

Lupus in Alberta

Age-sex Specific Prevalence, By First Nations Status, 2012

Lupus is a chronic autoimmune disease that can affect any part of the body (i.e. skin, joints, and organs). A healthy immune system creates proteins called antibodies that effectively fight off bacteria, viruses, and other germs. For a person with lupus, the immune system can’t distinguish between healthy tissue and a virus or bacteria. Therefore the immune system creates autoantibodies which sometimes attack healthy tissue. The exact cause of lupus is not known. Some factors that have been linked to the development of the disease are genetic and environmental factors, as well as possibly hormones (estrogen). There are different forms of lupus, with the most common being Systemic Lupus erythematosus (SLE). The case definition used for today’s issue of Health Trends Alberta refers to SLE. The terms “Lupus” and “SLE” are often used interchangeably since other forms of lupus (neonatal, drug-induced, and cutaneous lupus) are not common.

In today’s issue of Health Trends Alberta, we compare age and sex-specific prevalence rates of lupus in 2012 among First Nations and Non-First Nations Albertans.

Lupus affects greater proportion of Females and First Nations Albertans

As of June 30, 2012, there were 8,575 people living in Alberta with lupus.

Lupus is significantly more common among females than males. In 2012, 6,717 (78 per cent) of Albertans with Lupus were female.

Lupus also affects a significantly higher percentage of First Nations Albertans than non-First Nations. In 2012, 70 out of 1,000 First Nations 50 years of age or over had lupus, compared to 47 out of 1,000 non-First Nations.

The incidence rate of lupus has been on the increase steadily since 2000 (Not depicted in today’s HTA graph). In 2000, there were 242 new cases of lupus diagnosed in Alberta. In 2012, there were 611 new cases diagnosed. The age-standardized incidence rate almost doubled from 2000 to 2012, increasing from about 8 per 100,000 in 2000 to over 15 per 100,000 in 2012.