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| **Nursing diagnosis** | **Objectives** | **Nursing Interventions** | **Rationale** | **Evaluation** |
| Skin Lupus Erythematosus | Clear the overriding rashes. Relieve the pain | Issuing of adequate sun protection instruction It is managed in the short term with moderate-dose corticosteroids | Face: sparing behind ears, under nose, eyelids, hairline (make-up may be protective) | Contact allergy: Reaction to allergen exposed to light equal to unexposed site. Phototests involve exposing the skin to graduated doses of broadband and/or monochromatic ultraviolet |
| Photosensitivity dermatitis | Perform a diagnosis | moderate-dose corticosteroids | Neck: sparing the anterior portion under the chin and including a V on the anterior chest. Feet: dorsum of feet, sparing strap marks from sandals | Contact photo aggravation: Reaction to allergen exposed to light greater to unexposed site |
| Atomic dermatitis | Relieve itching. Clear the rashes |  | Dorsum of hands: sparing finger webs. Forearms: sharp cut-off at cuff level | Contact photoallergy: Reaction to allergen exposed to light but no reaction to unexposed allergen |
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| **doagnosis** | care plan |
| Skin Lupus Erythematosus | Assess the skin for integrity. Assess the client’s description of pain. Assess the degree to which symptoms interfere with the client’s lifestyle and body image. Encourage adequate nutrition and hydration.  Instruct the client to clean, dry, and moisturize intact skin; use warm (not hot) water, especially over bony prominences; use unscented lotion. Use a mild shampoo. |
| Photosensitivity dermatitis | Instruct the client to avoid contact with harsh chemicals and to wear appropriate protective gloves, as needed. Avoid hair dye, permanent solution, and curl relaxers.  Wear protective eyewear. Wear maximum protection sunscreen (SPF 15 or above) in the sun. Sunbathing is contraindicated.  Introduce or reinforce information about the use of hydroxychloroquine. |
| Atomic dermatitis | Introduce or reinforce information on drug therapy. Instruct the client in the potential side effects of steroids, immunosuppressant medication, and other drugs used to treat SLE. Stress to the client the importance of not altering the steroid dose or suddenly stopping the medication.  Instruct in lifestyle activities that can help reduce flare-ups such as: Eating a balanced diet of fruits, grains, and vegetables. Regular exercise Avoiding sun exposure Adequate rest |

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