

PATIENT FACT SHEET

Sjögren's Syndrome



DESCRIPTION

Sjögren's syndrome is an autoimmune disease. About half the time, it occurs along with other autoimmune conditions, like rheumatoid arthritis or lupus. Sjögren's syndrome may cause arthritis, or joint pain, and chronic dry mouth or eyes. Inflammation of the tear ducts and saliva glands cause dryness and irritation.

Sjögren's syndrome affects women about 10 times more often than men. It can start at any age, but usually

occurs between 45 and 55. Symptoms may be milder or more severe, but patients can often lead a normal life. Rarely, it can cause complications like an increased risk of lymphoma, a type of cancer.

Treatments for Sjögren's syndrome aim to ease symptoms like dryness and prevent long-term, related problems like infections or dental disease.



Dry eyes and mouth are common signs of Sjögren's syndrome. The eyes may burn or feel gritty. It may be hard to eat dry foods or swallow because of lack of saliva. Glands of the neck or face may swell up. Other Sjögren's syndrome symptoms include:

- Dry skin, vagina, nasal passages and throat
- · Acid reflux

Because of chronic dryness, patients may be at risk for eye infections or cornea damage, tooth decay or gum disease, and vaginal yeast infections. Some people with Sjögren's syndrome develop joint pain and stiffness even if they don't have RA or lupus. They may also have skin rashes, numb or tingling in the limbs, and rarely, inflammation of the lungs, kidneys or liver.



Diagnosing Sjögren's syndrome may include a physical exam, blood tests and biopsies. An eye exam may show changes seen in Sjögren's. A rheumatologist can do blood tests for anti-nuclear antibodies (ANA), anti-SSA and SSB antibodies, or rheumatoid factor, or perform a saliva gland biopsy to help make a diagnosis.

Treatments can ease symptoms. For eye dryness, patients may use artificial tears and eye gels, or take cyclosporine (Restasis) drops to increase tear production. For dry mouth, drinking water or chewing gum may help, but some patients need prescription drugs like pilocarpine (Salagen)

or cevimuline (Evoxac). Yeast infections can be treated with anti-fungal medicines, and patients with reflux may use drugs to reduce stomach acid, like proton-pump inhibitors or H2 blockers.

Some people with Sjögren's syndrome may need hydroxychloroquine (Plaquenil). For severe rashes, fever or pain, patients may need corticosteroids (prednisone), methotrexate (Rheumatrex, Trexall, Otrexup, Rasuvo), azathioprine (Imuran), mycophenolate (CellCept) or cyclophosphamide (Cytoxan). Biologic drugs like rituximab (Rituxan) are being tested for use in Sjögren's syndrome.



TIPS

Depending on your symptoms, Sjögren's syndrome can lead to other health problems or even serious complications. Here are tips to help prevent these:

- Get regular dental check-ups to prevent tooth decay, cavities and tooth loss.
- Stick to good oral hygiene habits.
- Get regular eye exams with an ophthalmologist to check for cornea damage.
- For severe eye redness or irritation, get checked for infections.

Updated March 2019 by Ali Duarte, MD, and reviewed by the American College of Rheumatology Committee on Communications and Marketing. This information is provided for general education only. Individuals should consult a qualified health care provider for professional medical advice, diagnosis and treatment of a medical or health condition.

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