

MED facts

An Educational Health Series From National Jewish Health®



Sjögren's Syndrome

Sjögren's syndrome (pronounced sho-grins) is a disease that causes dryness of the eyes and mouth. It can also affect other organ systems including the skin, joints, lungs, and nervous system. Sjögren's syndrome is a chronic disease, which means it lasts a long time.

The disease is named after Dr. Henrik Sjögren. He is the renowned physician who first described the features of the illness in the 1930's.

Sjögren's is a systemic autoimmune disease. This means that the body's natural immune system does not behave normally. Instead of serving to fight infections such as bacteria and viruses, the body's own immune system attacks itself. In Sjögren's syndrome, autoimmunity may lead the immune system to destroy the glands that produce tears and saliva. In addition, people with Sjögren's may suffer other organ damage by the abnormal immune response.

Many people develop Sjögren's in the absence of other autoimmune conditions. However, it is common to develop Sjögren's in association with other autoimmune diseases such as rheumatoid arthritis and lupus.

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What are Some of the Symptoms of Sjögren's Syndrome?

Sjögren's may have many symptoms. Common symptoms include:

- Dryness of the eyes,
- Dryness of the mouth,
- Difficulty swallowing,
- Change in taste,
- Frequent cavities,
- Frequent oral yeast infections,
- Swollen salivary glands,

- Heartburn
- Cough,
- Shortness of breath,
- Arthritis and
- Fatigue.

Who Gets Sjögren's Syndrome?

Between 1 and 4 million Americans have the disease. People of all races and ethnic backgrounds get Sjögren's syndrome. It is almost 10 times more common in women. It rarely occurs in children, and typically begins when people are between the ages of 45-and 55-years-old.

What Causes Sjögren's Syndrome?

The cause of Sjögren's syndrome is not known. As mentioned above, we do know that Sjögren's is an autoimmune disease. In Sjögren's syndrome, autoimmunity often leads to the destruction of the glands that produce tears and the glands that produce saliva. In addition, the abnormal immune response can also lead to other problems including, damage of blood vessels, joints, lungs, and the nervous system.

Are There Any Other Effects or Concerns?

Studies have shown that people with Sjögren's have a higher risk of developing a type of cancer known as lymphoma. Also, an antibody (protein created by the immune system) that may be present in pregnant women with Sjögren's can cause heart problems in newborns.

How is Sjögren's syndrome diagnosed?

Often times it is difficult to diagnose Sjögren's. It may take years before a definite diagnosis of Sjögren's is made. Often, a specialist in autoimmune diseases such as Sjögren's, (known as a rheumatologist), is required to establish the diagnosis.

The diagnosis of Sjögren's is made based on the careful analysis of many factors. A thorough history and physical examination are essential for the diagnosis. There are certain laboratory studies that can be helpful when considering the diagnosis. It is important to know that the diagnosis cannot be made based on any specific blood test alone.

It is often necessary to measure the amount of tear production (Schirmer's test) and/or perform a biopsy of a minor salivary gland to confirm the diagnosis of Sjögren's syndrome.

How is Sjögren's Syndrome Managed?

It is important to recognize that there is no cure for Sjögren's. In addition, because it is a chronic disease, people often require medical therapy for many years.

Goals of therapy vary for each person. Treatment is guided by whichever organs are affected. Artificial tears and ointments are used to keep the eyes moist. On occasion,

ophthalmologic procedures are needed to maintain eye moisture. Artificial saliva tablets and some saliva-stimulants (pilocarpine/Salagen, and cevimeline/Evoxac) are used for dryness of the mouth. People with Sjögren's require frequent dental check-ups to help maintain oral hygiene.

When there is evidence of blood vessel damage, nervous system or lung involvement due to Sjögren's, potent immunosuppression with corticosteroids (such as prednisone) and chemotherapy may be required. This is used to control the underlying autoimmune and inflammatory response.

What is the role of National Jewish Health?

National Jewish Health is one of the world's leaders in the study and management of immune diseases, such as Sjögren's. National Jewish Health also specializes in Interstitial Lung Disease (ILD), a lung condition that may be seen in people with Sjögren's. The National Institutes of Health has designated and funded National Jewish as a Specialized Center of Research for ILD.

Our health care providers have vast experience in treating people with Sjögren's. We provide the expertise needed for the comprehensive evaluation and management of people with Sjögren's syndrome. We aim to design an individualized treatment plan best suited for each person with Sjögren's syndrome. For more information or to schedule an evaluation with one of our Rheumatologists, call LUNG LINE® at 1-800-222-LUNG.

Note: This information is provided to you as an educational service of LUNG LINE® (1-800-222-LUNG). It is not meant to be a substitute for consulting with your own physician.

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