Cervical Cancer Risk Higher for Lupus Patients Who Use Immunosuppressive Treatments

Women with systemic lupus erythematosus (SLE) receiving immunosuppressive [treatment](https://lupusnewstoday.com/lupus-treatment/) may be at risk of developing high-grade cervical dysplasia and cervical cancer, compared to patients receiving hydroxychloroquine therapy alone.

Although more studies are necessary to confirm these findings, researchers emphasized that SLE women should consider being vaccinated against the human papillomavirus (HPV) infection, the main cause of cervical cancer.

The study titled “[Risk of high-grade cervical dysplasia and cervical cancer in women with systemic lupus erythematosus receiving immunosuppressive drugs](https://www.ncbi.nlm.nih.gov/pubmed/27799438),” was published in the journal [*Lupus*](http://journals.sagepub.com/home/lup).

Previous studies have suggested there may be a link between immunosuppressive treatment and an increased risk of cervical cancer among SLE women, but this possible relationship had not been investigated in the U.S.

In this study researchers investigated the risk of high-grade cervical dysplasia and cervical cancer among women with SLE who started immunosuppressive therapy versus the anti-inflammatory drug hydroxychloroquine.

The study included 2,451 matched pairs of new users of immunosuppressive drugs and hydroxychloroquine in the so-called commercial cohort, and 7,690 matched pairs in Medicaid, from 2000–2012. Researchers then assessed the incidence of cervical dysplasia and cervical cancer among the two groups of patients.

The commercial cohort had 14 cases of cervical dysplasia or cervical cancer among SLE women on immunosuppressive drugs, and five cases on the group receiving hydroxychloroquine. In the Medicaid group, 46 patients on immunosuppressive drugs and 29 patients on hydroxychloroquine developed cervical dysplasia or cervical cancer.

However, there were no significant difference in rates of high-grade cervical dysplasia and cervical cancer associated with immunosuppressive drug use.

In general, the findings mean that a lupus patient receiving immunosuppressives is 1.40 times more likely to develop cervical dysplasia or cervical cancer than a lupus patient undergoing treatment with hydroxychloroquine.

“Among women with systemic lupus erythematosus, immunosuppressive drugs may be associated with a greater, albeit not statistically significant, risk of high-grade cervical dysplasia and cervical cancer compared to patients receiving hydroxychloroquine alone.” the researchers wrote.

“Despite our large sample size, our power to detect clinically meaningful differences was limited, especially since the incidence of high-grade cervical dysplasia and cervical cancer was low in both of our cohorts,” researchers added. “Further studies are needed with extended follow-up time to determine whether prolonged duration of therapy contributes to increased risk.”

According to the team, HPV is the most common sexually transmitted disease among females in the U.S. and the main cause of high-grade cervical dysplasia and cervical cancer. Therefore, the researchers noted, “with the known safety and efficacy of the HPV vaccine, the trend observed in this study may serve as further impetus to ensure that SLE patients, especially those receiving [immunosuppressive drugs], are appropriately vaccinated for this preventable disease.

Reference

Lupus News Today (2019) Cervical Cancer Risk Higher for Lupus Patients Who Use Immunosuppressive Treatments. https://lupusnewstoday.com/2017/05/31/lupus-cervical-cancer-risk-im