**Women Who Loose Pregnancies and Subjects with Congenital Heart Diseases: Potential Key Populations for the Detection of Systemic Lupus Erythematosus in Sub-Saharan Africa**

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**DEAR EDITOR,**

Systemic lupus erythematosus predominantly affects women of childbearing age in sub-Saharan Africa as in other regions of the world [1]. Surprisingly, this disease was not mentioned among the causes of pregnancy loss in any of the 2689 studies reporting on pregnancies in sub-Saharan African women without a formal diagnosis of systemic lupus erythematosus, as per the results of our comprehensive search of PubMed, EMBASE and African Journals Online for studies addressing systemic lupus erythematosus and pregnancies in sub-Saharan Africa between 1st January 2000 and 28th October 2019. However, data on outcomes of pregnancy in sub-Saharan African women with established diagnosis of systemic lupus erythematosus retrieved from that same search, [2] together with regional data on maternal morbidity and mortality [3], provide some evidence that systemic lupus erythematosus may represent a non-negligible cause of pregnancy loss in sub-Saharan Africa. This hypothesis could be further elucidated by recent data suggesting a potentially considerable proportion of women with antiphospholipid antibodies/syndrome (with or without systemic lupus erythematosus) among sub-Saharan African women experiencing recurrent fetal demise [4]. On the same note, neonatal lupus may contribute to the incidence of congenital cardiac diseases in sub-Saharan Africa. Indeed, some congenital cardiac abnormalities seen in this region have been shown to occur in subjects with cardiac neonatal lupus [5,6].

The creation of lupus registries appears to be an important and cost-effective strategy to address the dire need for strong epidemiological data on systemic lupus erythematosus and systemic lupus erythematosus pregnancies in sub-Saharan Africa [1,2]. Such registries would best be placed wherever there is a potential to find high-risk populations, including those mentioned above. We therefore suggest the implementation of lupus registries across sub-Saharan African Obstetrics, neonatal and pediatric cardiology centers, under the supervision of rheumatologists and other treating physicians.

**REFERENCES**