

**Chorionic gonadotrophin/clomifene/
menotropins**

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Systemic lupus erythematosus?: 3 case reports

Three women developed systemic lupus erythematosus (SLE) after they received at least 6 cycles of ovulation induction treatment.

The first woman, aged 31 years, was treated with 6 cycles of clomifene and chorionic gonadotrophin [*dosages not stated*] for secondary infertility. She developed a facial rash and arthritis 1 month after completing the sixth cycle of therapy. On examination, she was noted to have a malar flush, fever and cervical lymphadenopathy. She had a positive antinuclear antibody (ANA) test and was diagnosed with SLE and treated with prednisone and hydroxychloroquine.

The second woman, aged 42 years, had received 10 cycles of ovulation induction therapy with menotropins and chorionic gonadotrophin [*dosages not stated*] because of primary infertility. Two months later, she noted arthralgia in her elbows, wrists and temporomandibular joints, progressive alopecia, fever and cervical and axillary lymphadenopathy. Tests for ANA were positive. SLE was diagnosed and she was treated with prednisone with immediate response.

The third woman, who was 34 years old, developed a skin rash 3 months after she completed 8 cycles of ovulation induction with clomifene, chorionic gonadotrophin and menotropins [*dosages not stated*] for primary infertility. Although the rash responded to hydroxychloroquine therapy, the woman had discontinued this agent and continued with menotropins and chorionic gonadotrophin treatment. She conceived after the second cycle, but had a spontaneous abortion at 20 weeks' gestation. Two weeks later, she developed severe peripheral oedema and shortness of breath. Her ANA test was positive and she had evidence of progressive glomerulonephritis. She was treated with prednisone and her condition stabilised.

Author comment: *'Since the incidence of overt SLE among women undergoing ovulation induction therapy is low, it is possible that this association is coincidental. However, the temporal relationship between the ovulation treatment and the onset of the disease in our patients is impressive.'*

Ben-Chetrit A, et al. Systemic lupus erythematosus induced by ovulation induction treatment. *Arthritis and Rheumatism* 37: 1614-1617, Nov 1994 - Israel

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