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## UNDERWRITER:

Defined as someone sitting  
in an ivory tower 900 miles  
from here, trained to say,  
"NO."

## YOUR JOB:

To convince that  
underwriter, with truthful  
information, presented in  
as favorable a light as  
possible that it is desirable,  
even possible to say  
"YES."

## What is Lupus?

Lupus is a chronic, inflammatory, multi system disorder of the immune system. Antibodies are created which react against the body's own tissue. This abnormal response can be extremely damaging and leads to the many manifestations of lupus. The course of the disease is highly unpredictable. Lupus is characterized by periods of improvement or remission to "flares" of activity.

Lupus is not contagious,

infectious, or malignant. It commonly occurs among young women of child-bearing years, although many men develop lupus. Lupus varies from mild to extremely severe where serious damage occurs to vital organs such as the lungs, heart, kidneys, and brain.

## Lupus is generally divided into three groups:

### *Discoid Lupus Erythematosus (DLE)*

Usually seen as only a skin rash on the face or other areas exposed to the sun. Local treatments including steroids are usually quite effective. DLE is considered to be a mild to occasionally severe disease, which rarely progresses to Systemic Lupus.

### *Systemic Lupus Erythematosus (SLE)*

Lupus means WOLF. Erythematosus means REDNESS. The name was coined in 1851 because the facial rash looks like the bite of the wolf. Today, lupus can be controlled with proper medical treatment. There is no cure for lupus.

### *Drug Induced systemic Lupus*

A syndrome that develops after the use of certain drugs, characterized by inflammation, fever, rash, and arthritis. Rarely progresses to kidney or other organ involvement. Usually subsides with time, after the use of the offending drug is discontinued.

A few of the drugs that can cause drug induced system lupus include: heart medication, anticonvulsants, antibiotics, and immunizations.

## What are the symptoms of lupus?

Common symptoms include: extreme fatigue, swollen joints, unexplained fever, skin rashes, chest pain, hair loss, sensitivity to the sun, anemia, purple fingers and toes from cold or stress.

While most people with lupus only experience a skin rash, or swollen joints, others experience severe complications of other organs including: kidneys, lungs, heart, blood vessels, and the central nervous system.

## To properly evaluate insurability you must obtain answers to the following important questions:

*When was the client diagnosed with lupus?*

The longer the client has had lupus, the more time the disease may have had to do damage. It is important to document when the diagnosis was first confirmed. Spontaneous remissions and relapses commonly occur with lupus. Lupus tends to become progressively more severe with time.

*Has the disease been diagnosed as DLE, or the far more serious SLE?*

*What has been the pattern of the lupus since initial diagnosis?*

Clients may have flares followed by remission without worsening. Others exhibit progressively increasing severity of the flares. It is important to determine the exact pattern of the client's disease to determine his degree of clinical stability.

*Are there complications secondary to lupus?*

Heart and kidney problems are common secondary complications of lupus that frequently prove fatal. What organs are involved? How long have these complications been present?

*What medications is the client currently taking?*

Medication can limit the flares and slow down the progress of the disease. It is important to document the exact medications the client is taking.

## UNDERWRITING PROGNOSIS

Mild cases, clearly diagnosed at DLE should not be difficult to underwrite at Standard to very moderate ratings.

Severe cases of SLE involving complications of organs other than the skin or joints may be very difficult to underwrite, even at significant ratings.

Severe cases involving multiple organs, where the disease is progressing rapidly will usually be declined.