



Sjögren's Syndrome Fact Sheet

Sjögren's is the 2nd most common autoimmune disorder affecting as many as four million Americans. However, it takes an average of approximately five years to properly diagnose this disease from the time when initial symptoms appear. Dry mouth and dry eyes are hallmark symptoms of Sjögren's but many patients also experience extreme fatigue and joint pain as well as many other issues throughout the entire body. Because moisture is so vital to healthy bodily systems such as digestion and vision, the significant delay in managing the symptoms of Sjögren's can result in serious complications, including damage to vital organs and systems throughout the body. This fact sheet explains the causes of Sjögren's, the symptoms associated with the disorder, challenges in diagnosis and treatment options.

What is Sjögren's?

Sjögren's (pronounced SHOW-grins), identified by Swedish physician Henrik Sjögren in 1933, is a chronic autoimmune disorder in which the body attacks the exocrine glands – the glands that produce moisture needed in the mouth, skin, eyes, vaginal area, gastrointestinal tract and respiratory tract. Exocrine glands include the salivary glands, which produce saliva, an essential body fluid critical to overall digestive and oral health. The exact cause of Sjögren's is unknown. However, scientists believe that genetic factors and environmental contacts to certain viruses or bacteria may increase the risk of developing the disorder. Although none of these factors are directly associated with the disorder, scientists believe that there may be a link to Sjögren's.

What are the symptoms of Sjögren's?

The hallmark symptoms are dry mouth and dry eyes due to decreased secretions by the salivary and tear secreting glands. Patients may experience many other symptoms as well which include:

- Dry, gritty or burning sensation in the eyes
- Difficulty talking, chewing or swallowing
- Sore or cracked tongue
- Dry or burning throat
- Dry, peeling lips
- Dry nose
- Vaginal and skin dryness
- Change in taste or smell
- Increased dental decay
- Digestive problems
- Joint pain
- Fatigue

Symptoms often vary from person to person and may worsen, stay the same or, uncommonly, go into remission. Some patients experience only mild discomfort from their symptoms, while others may incur damage to internal organs or various systems in the body such as circulatory, digestive, nervous and respiratory, greatly impairing their daily functioning.

Who is most likely to develop Sjögren's?

Nine out of 10 people who develop Sjögren's are women. Most patients are diagnosed in their late 40s. However, the disorder has been recognized in nearly all racial and ethnic groups and in all age groups, including children.

How is Sjögren's diagnosed?

Sjögren's is often undiagnosed or misdiagnosed. A diagnosis may be difficult because symptoms can vary from person to person and may mimic those of menopause, drug side effects or medical conditions such as lupus, rheumatoid arthritis, fibromyalgia, chronic fatigue, and multiple sclerosis. Because all symptoms are not always present at the same time, clinicians sometimes treat each symptom individually rather than systemically (the body as a whole).

Clinicians use a range of criteria to help identify patients with Sjögren's, including changes in salivary and lacrimal (eye) gland function, dryness symptoms and systemic symptoms. Rheumatologists are primarily responsible for diagnosing and managing the disorder, although a patient's care team may also include eye doctors and dentists. No single test can confirm Sjögren's; however, a battery of tests are available to assist in diagnosis.

- Blood tests measure inflammation or detect certain antibodies found in most patients with the disorder
- Eye tests measure tear production or examine the surface of the eye for dry spots
- Salivary tests measure saliva production or examine tissue from the salivary gland

How is Sjögren's treated?

While there is no known cure for Sjögren's, treatments are available that may improve symptoms and prevent complications. With early diagnosis and proper treatment, many patients are able to manage their symptoms so they can continue to lead full lives.

To help relieve the dry-mouth symptoms associated with Sjögren's, doctors may recommend:

- Saliva substitutes
- Prescription medications to help stimulate the salivary glands and increase the production of saliva or to treat oral candidiasis (thrush), an infection cause by the yeast *Candida*.

To help relieve the dry-eye symptoms associated with Sjögren's, doctors may recommend:

- Over-the-counter (OTC) or prescription artificial tears or ointments
- In more extreme cases, surgery to seal the tear ducts in the eyes

If a person's symptoms go beyond those affecting the exocrine glands, doctors may recommend:

- Nonsteroidal anti-inflammatory drugs (NSAIDs) to help relieve joint and muscle pain
- Antifungal medications to treat yeast infections in the mouth
- Steroids, and/or immunosuppressive drugs to treat systemic symptoms

Where can I get more information about Sjögren's?

For more information about Sjögren's, please visit www.Sjogrens.org or call (800) 475-6473.

Sjögren's Syndrome Fast Facts

- The hallmark symptoms are dry eyes and dry mouth.
- Many patients also experience fatigue and joint pain
- Sjögren's is the 2nd most common autoimmune disorder affecting approximately four million Americans.
- Nine out of ten patients are women.
- The average age of diagnosis is late 40s.
- The average time from the onset of symptoms to diagnosis is five years.
- Sjögren's is treatable. Early diagnosis and the right treatment may improve symptoms and prevent serious complications associated with the disorder.