

Quick Fact Social Media Copy

This document includes sample captions you can use when sharing the quick fact social media graphics. Each caption is designed to help you share key information about and spread awareness about these common complications of scleroderma.

GI Complications

Most people living with scleroderma have mild to severe gastrointestinal problems. This can appear in many forms and involve different levels of risk, from simple indigestion to esophageal blockage.

The GI tract in our body is involved in consuming and processing the food we eat and eliminating waste. In scleroderma, fibrosis (scarring) makes the walls of the gut thicker and the muscles don't work as effectively. This affects the way food is moved through your body and digested and causes digestive problems.

Some GI symptoms scleroderma patients may have include stomach pain, difficulty swallowing, and acid reflux, nausea, heartburn or indigestion, and changes in appetite.

Fortunately, most symptoms can be managed with help from your healthcare team. The GI system is complex. Treating GI symptoms is important but diagnosis and treatment will differ according to the location of the symptom or problem.

Joint Pain Complications

How does scleroderma affect your joints?

When scleroderma affects the body, it can impact everything from tendons to joints, leading to changes in mobility.

The increased production of collagen associated with scleroderma can cause vascular dysfunction. This can contribute to stiffness, warmth, tenderness, and pain in the joints and muscles.

Development of fibrotic tissue can affect movement. Additionally, scarring and thickening of the skin can cause painful contractures of the fingers, wrists, or other joints, causing them to become "stuck" in a flexed position.

Aspirin or other non-steroidal, anti-inflammatory prescriptions can help with muscle pain and stiffness. Simple hand and face exercises may ease specific symptoms and gentle cardiovascular exercise that focuses on your entire body (walking, swimming, yoga) can also help. Be sure to talk to your doctor about your treatment plan before using any new medications.

Kidney Complications

Scleroderma can affect many different parts of the body, including the kidneys. In systemic scleroderma, the kidneys can be damaged due to a sudden and severe increase in blood pressure. This is called scleroderma renal crisis (SRC).

SRC is very serious. Sudden onset of high blood pressure (hypertension) of more than 150/85mmHg is the key symptom of renal crisis. It causes an almost immediate decrease in kidney function. Some symptoms to watch for include headache, visual disturbances, seizures, fever, changes in blood or urine chemistry, and pulmonary edema (fluid in the lungs).

One class of antihypertensive medications known as angiotensin converting enzyme inhibitors (ACE inhibitors) are effective, although many patients require more than one drug. If the blood pressure can be promptly and completely controlled, kidney injury can be prevented and over time can reverse.

Limited Scleroderma

Let's talk about the most common type of scleroderma: limited scleroderma.

Limited scleroderma affects about two-thirds of systemic sclerosis patients. It's sometimes called CREST Syndrome, because of these commonly associated physical characteristics:

- ◆ Calcinosis—hard, painful calcium deposits in the skin.
- ◆ Raynaud's Phenomenon—when the feet and hands turn white, then blue, then red in response to cold or stress.
- ◆ Esophageal problems—trouble swallowing or acid reflux.
- ◆ Sclerodactyly—tightening of the skin on the fingers and toes.
- ◆ Telangiectasias—small red spots due to dilated blood vessels on the face, lips, forearms, or fingers.

Limited (CREST) scleroderma usually progresses more slowly than diffuse scleroderma. Chronic pain, loss of mobility, and disfigurement are possible. Treating limited scleroderma symptoms is very important. The disease can still be life-threatening. It is critical to monitor for organ damage. Serious complications can occur related to the esophagus, other parts of the

gastrointestinal tract, and the lungs.

Skin Ulcers

Skin ulcers affect about 50% of people with limited or diffuse scleroderma. Let's break down the basics of what they are and management approaches.

For people with scleroderma, skin ulcers most often appear at the tips of fingers (digital ulcers). Skin ulcers may also extend under the fingernails, or to the joints at pressure points like elbows when the skin is stretched too tight. Scleroderma skin ulcers may also occur on the legs or other parts of the body following minor trauma such as a bruise. These sores may be very painful and can make it difficult to use your hands or other parts of your body.

Some ways to prevent skin ulcers include avoiding stress and cold, keeping as warm as possible, using Band-Aids, and wearing layers of clothing. Basic wound care and over-the-counter (OTC) medications may help with healing and pain management. Medications for skin ulcers in scleroderma may also be recommended.