

Atypical Systemic Sclerosis-related myositis: report of a case

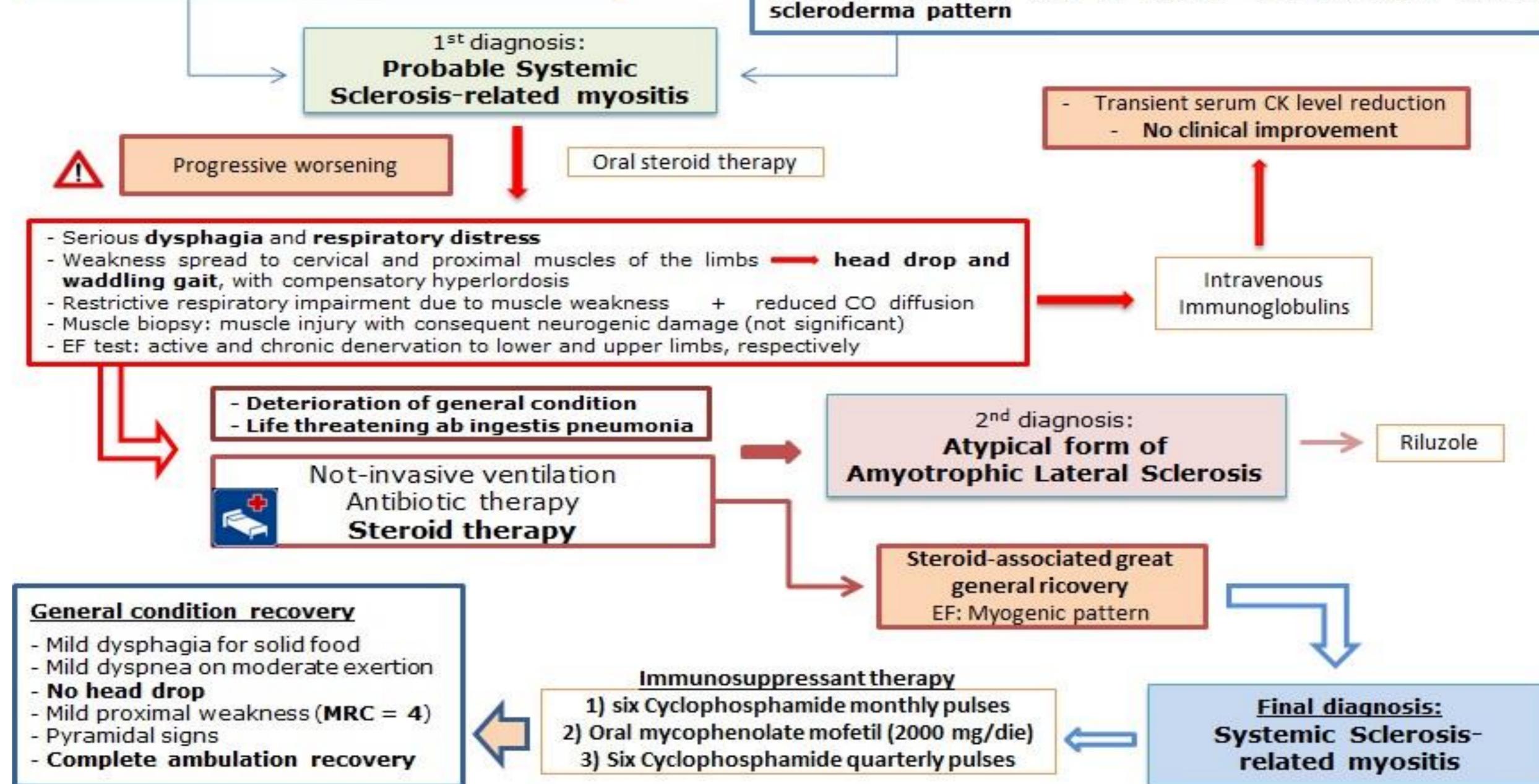


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Background: Systemic Sclerosis (Scc) is a rare, autoimmune disorder, characterized by inflammation, vascular injury, and fibrosis of skin and internal organs. Recent studies reported up to 40% neurological consequences in the disease, expecially involving PNS, particularly muscles. The clinical presentation of SSc-associated myopathy shares many features with polymyositis or dermatomyositis, as the weakness is symmetrical, expecially in proximal muscles, and the histopathological pattern often shows inflammation, along with endomysial microangiopathy and interstitial fibrosis.

 63-year-old woman progressive weakness to masticatory, articulation, respiratory and facial muscles → nutritional and breathing troubles with loss of weight and autonomy in daily activities 	 Neurological exam: Pyramidal signs, such as four limbs hyperreflexia, bilateral Hoffman and left foot Babinski Sierological tests: elevated CK and nucleolar pattern antinuclear
	 antibodies (ANA) Neither electrophysiological nor imaging studies were relevant Rheumatology evaluation: Raynaud phenomenon, face and forearms sclerosis and a typical capillaroscopic active



Discussion: The peculiarity of our case can be found in the atypical Systemic Sclerosis presentation which led to a misdiagnosis. Rare cases of scleroderma-associated Amyotrophic Lateral Sclerosis are described, even if a clear link between those diseases have not been found. The pyramidal signs which led to a Motor Neuron disease diagnosis, along with respiratory and bulbar muscles distress and electrophysiological abnormalities, could be reconducted to chronic medulla ischemia due to vascular injury or immune mechanism as some authors proposed. It has been estimated that up to 10% of patients initially diagnosed as having ALS are afterwards rediagnosed as having a disease other than ALS, included in the so called 'amyotrophic lateral sclerosis (ALS) mimic syndrome'.

Conclusion: In our case correct diagnosis and therapies had great impact on patient's prognosis and quality of life. As the proper diagnosis of ALS remains a complex clinical problem and brings a lot of further implications, recognizing the neurological involvement of those mimicking diseases – i.e. Systemic Sclerosis we described – has to be a critical goal.

References

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