# Scleroderma or systemic sclerosis and Homoeopathy

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The term "scleroderma" arises from "sclera" means hard and "derma" means skin.

## Definition

Scleroderma or systemic sclerosis is an autoimmune disease that affects the blood vessels and connective tissue associated with prominent inflammatory features followed by the development of widespread functional and structural alterations in multiple vascular beds and progressive visceral organ dysfunction resulting in deposition of fibrous connective tissue leading to scarring, chronic hardening and contraction of the skin and connective tissue, either locally or throughout the body including skin, heart and blood vessels, lungs, stomach and kidneys.

## Causes

The cause of scleroderma is not known. Genetic factors may be important in the disease. Although exposure to certain chemicals may play a role in some people having scleroderma, the vast majority of patients with scleroderma do not have a history of exposure to any doubtful toxins.

## Pathophysiology

There is a recipe of generalized obliterative vasculopathy of small arteries and arterioles and fibrosis in the skin and internal organs. There is no inflammation in relatively early-stage disease but lesions occur as perivascular cellular infiltrates in multiple organs prior to the appearance of fibrosis. In the skin, infiltrates are located in the reticular dermis. There is eosinophilic degranulation. The vascular lesion is characterized by intimal proliferation in the smaller arteries, resulting in luminal narrowing. Obliterative vasculopathy is a late finding, present in the heart, lungs, kidneys, and intestinal tract. Tissue fibrosis is found in the skin, lungs, gastrointestinal tract, heart, tendon sheath, perifascicular tissue surrounding skeletal muscle, and some endocrine organs. Accumulation of connective tissue composed of collagens, fibronectin, proteoglycans, and other structural macromolecules leads to progressive replacement of normal tissue construction, resulting in functional damage of affected organs.

## Types

There are two types of scleroderma -

***Localized scleroderma-*** It usually affects only the skin. Occasionally, it can spread to the muscles, joints and bones. It does not affect other organs. Symptoms include morphea, linear scleroderma characterized by streaks or bands of thick, hard skin on the arms and legs. When linear scleroderma occurs on the face and forehead, it is called en coup de sabre.

***Systemic scleroderma-*** It is the grave form of the disease, affects the skin, muscles, joints, blood vessels, lungs, kidneys, heart and many other organs.

## Clinical picture

The early symptoms of scleroderma are unexplained fatigue, arthralgia, myalgia, weakness, and the new onset of Raynaud's phenomenon. There is thick, indurated skin that begins on the trunk, especially over the upper back and shoulders, and can spread to arms, legs, and face.

The other main symptoms are-

- The skin may also become glossy or unusually dark or light in certain places i.e. salt and paper appearance.
- Sometimes changes are personal appearance, especially in the face.
- Enlarged red blood vessels on the hands, face and around nail beds i.e. telangiectasiasis.
- Calcium deposits in the skin or other areas.
- Heartburn and other digestive tract problems such as GERD, difficulty in swallowing food, bloating and constipation, bleeding, oesophageal strictures, and Barrett's oesophagus.
- Shortness of breath.
- Joint pains.
- Lung damage- the first type- Interstitial lung disease due to scarring and the second type- Pulmonary arterial hypertension.
- Sjogren’s syndrome.
- Dry eyes- keratoconjunctivitis sicca.
- Dry mucous membranes- xerostomia.
- Unilateral or bilateral trigeminal neuralgia.
- Depression.
- Impotence.
- Acute pericarditis.
- Myocardial fibrosis leading to cardiomyopathy and heart failure.
- Coronary circulation vasospasm.
- Myocarditis associated with diffuse inflammatory polymyositis.
- Scleroderma kidney disease due to scarring.
- High blood pressure due to kidney involvement.
- Defects in conduction and cardiac rhythm.

- The tendon friction rubs secondary to fibrin deposition and fibrosis in the tissues.

## Diagnosis

Diagnosis is often tricky as symptoms may be similar to those of other diseases. There is no one blood test or X-ray that can confirm scleroderma.

X Ray of hand may show diffuse soft-tissue swelling of the digits, characteristic of the early oedematous phase of scleroderma.

## Treatment

GENERALS - SCLERODERMA

alum. Ant-c. arg-n. ars. berb-a. brass-n-o. Bry. caust. Crot-t. echi. Elae. Hydr. kali-c. lyc. petr. Phos. rad-br. ran-b. rhus-r. sarcol-ac. sars. sep. sil. still. sulph. syc. thiosin. thyr. x-ray

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 Figure 14–20. Scleroderma: claw-like hand deformity and shiny, tight skin. It can be linked... Hurst's The Heart > Chapter 14. The History, Physical Examination, and Cardiac Auscultation > Syndromes Associated with Congenital Heart Disease > Disorders Affecting the Valves

 Figure e16-62. Scleroderma characterized by typical expressionless, mask-like facies. Harrison's Online > Chapter e16. Atlas of Skin Manifestations of Internal Disease > Immunologically Mediated Skin Disease

 Figure e16-64. Scleroderma showing acral sclerosis and focal digital ulcers. Harrison's Online > Chapter e16. Atlas of Skin Manifestations of Internal Disease > Immunologically Mediated Skin Disease

 In scleroderma, there is tightening of the skin of the fingers and then the hands, forearms, upper... Hurst's The Heart > Chapter 14. The History, Physical Examination, and Cardiac Auscultation > Syndromes Associated with Congenital Heart Disease > Disorders Affecting the Valves

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Radar 10

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