

Tumoral Calcinosis During the Course of Systemic Sclerosis

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Although rare, tumoral calcinosis can occur during the course of systemic sclerosis (SSc).

A 51-year-old woman was diagnosed in 2011 with limited cutaneous SSc, complicated by myositis. The main clinical manifestation was extensive calcinosis at multiple localizations (hip, finger, back, neck), leading to significantly reduced quality of life. One year later, she complained of left coxalgia. Computed tomography demonstrated tumoral soft tissue calcification surrounding the left hip joint (Figure 1). Ectopic soft tissue calcinosis is frequent (i.e., 25%) in limited SSc. Lesions are commonly located in pressure areas, most frequently in the hands. Calcinosis presumably occurs in tissues damaged by mechanical stress, hypovascularity, and tissue hypoxia¹. Tumoral calcinosis

can occur during the course of SSc, but is very rare. Treatments with warfarin, colchicine, bisphosphonate, diltiazem, minocycline, and surgical excision have been reported, but none have shown significant efficacy^{1,2,3}.

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Figure 1. Computed tomography demonstrated tumoral soft tissue calcification surrounding the left hip joint.