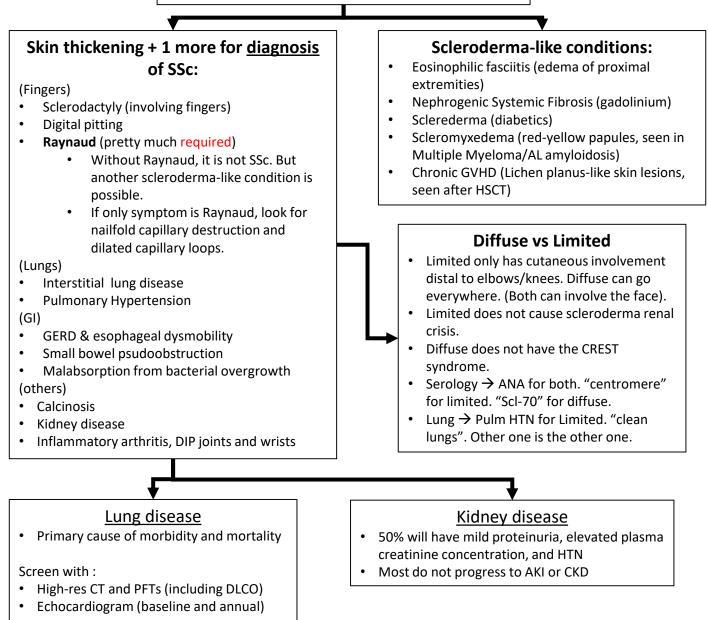
## Systemic Sclerosis (SSc)

Clinical Hallmarks → skin thickening



## <u>Treatment</u>

- Treat organ specific manifestations. No overall disease modifying agent.
- Raynauds → amlodipine, sildenafil, nitroglycerin paste
- Alveolitis/ILD  $\rightarrow$  mycophenolate (1<sup>st</sup> line). Otherwise, cyclophosphamide.
- GI / motility  $\rightarrow$  PPI for GERD; promotility agents (metoclopramide)
- Bacterial overgrowth  $\rightarrow$  broad spectrum antibiotics
- Renal crisis → ACE-I. Only if suspecting renal crisis. Continue even with renal failure. Avoid primary prevention → ace-I may precipitate renal crisis.
- AVOID glucocorticoids. Can precipitate normotensive renal crisis (AKI without HTN).

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