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Calcinosis as a complication of juvenile dermatomyositis (JDM)

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Background

Calcinosis is a common complication of JDM. It may varies on extension and severity. May cause mechanical and aesthetic complications and predispose to infections.

Aim

To evaluate the frequency and features of calcinosis in a cohort of patients with JDM and identify if there are risk factors.

Methods

Retrospective descriptive study in 3 pediatric rheumatology centers in Bogota during a period of 20 years. Two groups were identified according to the presence or absence of clinical and radiological signs of calcinosis after a minimum of 2 years of follow up.

Results

17/42 developed calcinosis associated with earlier onset of the disease, male predominance and chronic. Calcium deposits were classified as: superficial nodular, deep nodular, mass, linear or mixed deposits and calcinosis universalis. 80% had two or more types of deposits. The anatomical areas more frequently affected were the thighs and forearms. Complications included: drainage, chronic ulcers, mass effect, mechanical blockage of the joints and infections. Severe calcinosis was also associated with significant muscle atrophy loss and lipodystrophy.

Table

GROUP	With calcinosis		Without calcinosis		Pvalue
Number	17		25		
Sex distribution (Male:female)	1.83:1		1:3.16		0,008
Age of onset (average of years)	6,29(1,5-12)		7,08(2-16)		0,633
Delayed diagnosis (>6months)	6/17	35%	5/25	20%	0,268
Monocyclic	1/17	6%	12/25	48%	0,004
Policiclic	3/17	18%	3/25	12%	0,608
Chronic	14/17	82%	7/25	28%	0,001

Conclusion

Calcinosis is common and severe of JDM. It leads to various complications and treatment response is poor. Early diagnosis and proper treatment may reduce the frequency of this complication.

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