Tumoral calcinosis in systemic sclerosis

Rodrigues J[1], Almeida DE[1], Silva J[1], Azevedo S[1], Guimarães F[1], Parente H[1], Faria DS[1], Costa J[1]

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INTRODUCTION

Tumoral calcinosis is a rare condition presenting with periarticular, calcified masses in soft tissues[1]. It can be either primary or secondary to a collagen vascular disease[1]. Calcinosis occurs in about 25% of patients with systemic sclerosis (SSc), usually, those with the limited form of the disease[1], but a tumor-like calcification of large joints is uncommon, occurring in less than 1% of patients[2].

CASE REPORT

A 68-year-old female with a 4-year history of limited cutaneous SSc presented to the hospital with productive cough and wheezing. Raynaud's phenomenon, cutaneous thickening, digital calcinosis, and esophageal dysmotility had been described as her main disease manifestations. She performed a chest x-ray which was unremarkable for lung parenchymal alterations but showed an ill-defined lesion near the right acromioclavicular joint. Tomography imaging of the shoulder revealed multiple and agglomerated soft tissue calcifications adjacent to the lateral portion of the right clavicle, measuring 59 x 36 x 31mm (Figure 1-A). Magnetic resonance imaging of the shoulder (Figure 1-B) showed the same calcified conglomerate also with deltoid muscle involvement. No other suspicious masses were found, and the neoplastic etiology was excluded, making tumoral calcinosis associated with SSc the most likely diagnostic hypothesis in this case.

1 Serviço de Reumatologia, Unidade Local de Saúde do Alto Minho

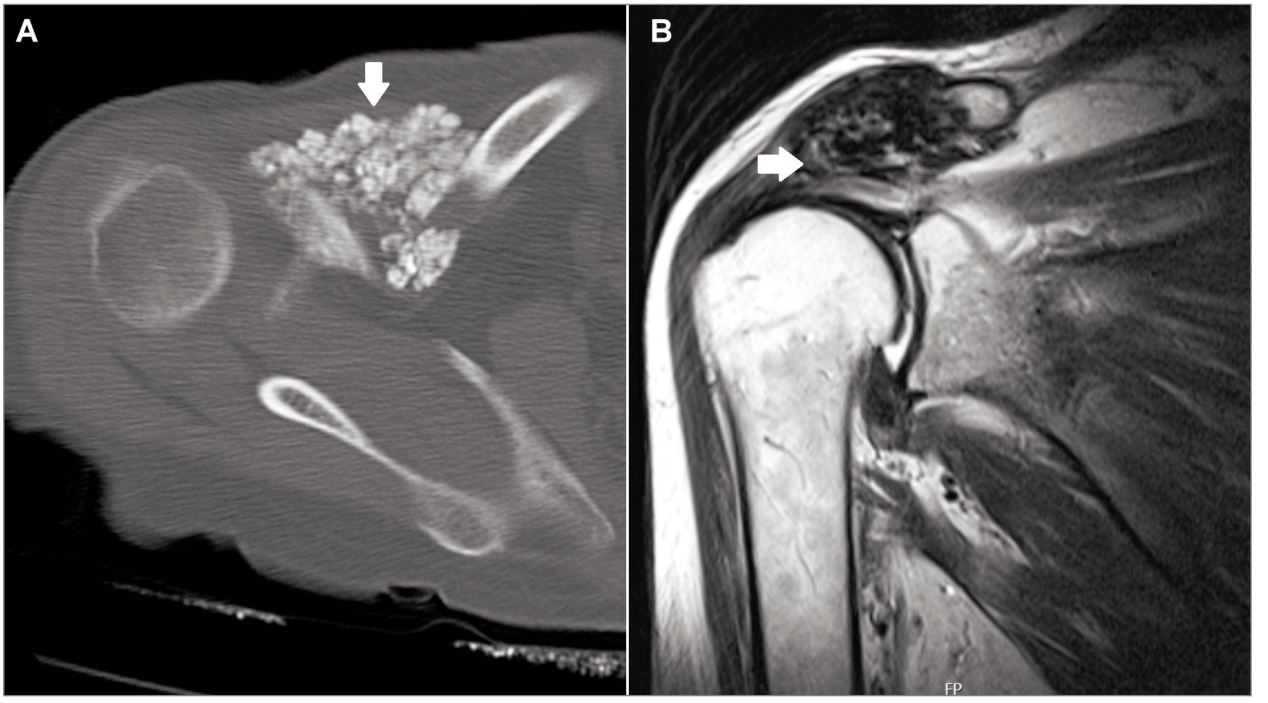

FIGURE 1. Shoulder tumoral calcinosis in a woman with systemic sclerosis. A) Axial tomography imaging of the shoulder revealing multiple lobulated, calcified nodules with a periarticular distribution, adjacent to the lateral portion of the right clavicle, measuring 59 x 36 x 31mm (white arrow); B) T2 weighted coronal magnetic resonance imaging of the shoulder showing the same calcified conglomerate also with deltoid muscle involvement (white arrow).

CORRESPONDENCE TO
Joana Ramos Rodrigues
Serviço de Reumatologia - Hospital Conde de Bertiandos
Rua Conde de Bertiandos, 4990-041 Ponte de Lima
E-mail: joanarodrigues_90@hotmail.com

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