AUTOIMMUNE CONNECTIVE TISSUE DISEASES

# A CASE OF DIGITAL ULCER IN A PATIENT WITH SYSTEMIC SCLEROSIS AND ANTIPHOSPHOLIPID ANTIBODY SYNDROME

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Background: Digital ulcers are often refractory in patients with systemic sclerosis. The treatment of digital ulcers includes the administration of antiplatelets and anticoagulants; however, the strengthening of such therapies is associated with a risk of bleeding. There are no guidelines on the strengthening of antiplatelet or anticoagulant therapy for systemic sclerosis patients who develop digital ulcers. Antiphospholipid syndrome is a rare condition in patients with systemic sclerosis.

Observation: The patient was a 63-year-old woman who visited our hospital to undergo treatment for systemic sclerosis, antiphospholipid syndrome and Sjogren syndrome. She had a history of deep vein thrombosis and cerebral infarction due to antiphospholipid syndrome. Systemic lupus erythematosus was not detected. A blood analysis was positive for anti-centromere antibody, anti-SS-A antibody, anti-SS-B antibody, lupus anticoagulant (dRVVT), anticardiolipin antibody IgG and beta 2-glycoprotein I-dependent anticardiolipin antibody. She was treated with warfarin potassium, clopidogrel sulfate and cilostazol. The INR of the case remained ≥1.4. During treatment with these agents, she developed a digital ulcer on the index finger of the right hand. The clinical picture was typical of a digital ulcer in systemic sclerosis. The MRI findings showed decreased blood flow from the radial artery to the digital ulcer. The digital ulcer healed four months after the initiation of treatment with bosentan and basic fibroblast growth factor spray.

Key message: Digital ulcers may develop in systemic sclerosis patients, even under treatment with strong doses of antiplatelet and anticoagulant agents. In such cases, further treatment with antiplatelets and anticoagulants is difficult due to the bleeding risk. The effectiveness of bosentan and basic fibroblast growth factor spray in this case was very interesting, considering the pathogenesis of the digital ulcers in systemic sclerosis.