

AUTOIMMUNE CONNECTIVE TISSUE DISEASES

AN EVALUATION OF LONG-TERM OUTCOMES AND RECURRENCE RATES IN PATIENTS WITH MORPHEA

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Introduction: Morphea is a rare sclerotic skin disorder that could lead to permanent morbidity and functional impairment.

Objective: The aim of the study was to identify morphea recurrence rates and related risk factors.

Methods: We conducted a retrospective study enrolling all patients diagnosed with morphea, with a minimum follow-up duration of 1 year between 2000 and 2017.

Results: Over the study period, 96 patients were enrolled (median age: 28 ± 21 years). Circumscribed morphea was the most frequent morphea subtype (52 patients, 54.1%), followed by linear scleroderma (34 patients, 35.4%), generalized morphea (8.3%) and pansclerotic morphea (2.1%). Seventy-nine patients received local (43.8%) and/or systemic (56,2%) treatment. Methotrexate was started in 37.5% of patients. Remission and stability were noted in 43 (64,2%) and 17 (25,4%) patients respectively. Recurrence after initial efficiency was noted in 16 (16,7%) patients, occurring after a mean period of 15 months. Recurrences were significantly associated to earlier age, linear scleroderma subtype and initial deep tissue sclerosis (p<0.05). Limb growth disorder was noted in 7 patients. Mean follow-up period was 46 months.

Conclusions: Disease recurrences are frequent, affecting about one fifth of our patients. Risk factors are earlier age at onset of the disease, linear scleroderma subtype and initial deep tissue sclerosis. Interestingly, our study showed that disease recurrences can occur after years of quiescent disease. Therefore, patients should be informed about the potentially chronic and relapsing course of the disease, and the importance of long term follow-up.





