Calcinosis represents a late manifestation of limited systemic sclerosis (lSSc), inducing tissue damage and chronic calcifications. Bone metabolism studies in lSSc patients are rare in literature and there are few studies that analyzed clinical, laboratory and bone mineral density (BMD) parameters together.

Objectives: The aim of this study was to compare and analyze clinical aspects and laboratory parameters, including bone metabolism variables in female lSSc patients with and without calcinosis, paired by age, disease duration and body mass index (BMI).

Methods: Thirty-six female lSSc patients with calcinosis were compared to 36 female lSSc patients without calcinosis, matched by age, disease duration and BMI. Organ involvement, autoantibodies, BMD by DXA and laboratory parameters were analyzed. The past and current treatment modalities were also questioned. Statistical significance was considered if p<0.05.

Results: Esophageal hypomotility, digital ulcers, and interstitial lung disease were the most frequent clinical manifestations of lSSc patients, present in similar frequency in both groups. Calcification was significantly associated with acroosteolysis (69% vs. 22%, p<0.001), higher modified Rodnan skin score (mRSS) (4.28±4.66 vs 1.17±2.50, p<0.001), higher 25OHD levels (3.43±0.45mg/dl; p<0.001) serum levels. 25OHD levels >30ng/ml associated with acroosteolysis (69% vs. 22%, p<0.001), higher modified Rodnan skin score (mRSS: 4.28±4.66 vs 1.17±2.50, p<0.001), higher serum levels of 25OHD and phosphorus when compared with patients without calcinosis paired by age, disease duration and BMI.

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