Sicca: an important manifestation of damage in systemic sclerosis (SSc) and SSc-overlap syndromes. Response to 'Do the salivary glands of patients with systemic sclerosis show ultrasonographic modifications suggestive of Sjögren's syndrome?' by Coudrec *et al*

We thank Dr Coudrec *et al* for reporting this interesting study of ultrasonographic changes in salivary glands of patients with systemic sclerosis (SSc).¹ Their findings of a high frequency of xerostomia and xerophthalmia, together with morphological echostructure modifications of the major salivary glands in patients with SSc, support the inclusion of sicca symptoms as an item in the Scleroderma Clinical Trials Consortium-Damage Index (SCTC-DI).² As pointed out by Dr Coudrec *et al*, sicca symptoms feature prominently in the SCTC-DI, being assigned 3 points of a total possible score of 55. This weighting reflects the strong association of sicca symptoms with the SF-36 quality of life score, a surrogate measure of morbidity used along with mortality data to weight the SCTC-DI items. Collectively, the inclusion of sicca symptoms in the SCTC-DI and the findings reported in this French study underpin the importance of sicca symptoms as a key manifestation of SSc and SSc-overlap syndromes, which is greatly in need of further research and effective therapies.

Mandana Nikpour

Correspondence to Dr Mandana Nikpour, Department of Medicine, University of Melbourne, Fitzroy, VIC 3065, Australia; m.nikpour@unimelb.edu.au

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