Editorial

Clinical and Experimental Scleroderma 2014

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Received and accepted on October 13, 2014.

Clin Exp Rheumatol 2014; 32 (Suppl. 86): S3.

Key words: systemic sclerosis

Competing interests: none declared.

Systemic sclerosis (SSc) still presents a major diagnostic and management problem for patients and their physicians, but despite this, the past twelve months have witnessed some important events in the field. In late 2013, the new EULAR/ACR classification criteria were published, an event which facilitates entry of patients into therapeutic trials and observational cohorts at an earlier stage of their disease. The Third Systemic Sclerosis World Congress gathered together physicians, health professionals and patients in a comprehensive programme in Rome in February 2014 and the World Scleroderma Foundation recently deepened its collaboration with EUSTAR to further SS-related research and teaching globally.

An increasing interest in SSc has resulted in a gratifyingly high number of quality original publications in the field, many of which are contained in this edition of *Clinical and Experimental Scleroderma*. Basic research aspects include the finding of antiphospholipid antibodies in many of those with SSc, and dysfunctional arteriovenous anastomoses in the hands of many patients, emphasising the importance of the vascular component of SSc pathophysiology. Also, the fibrotic component continues to be seen as critical, as evidenced by the finding of overexpression of Toll-like receptors (including TLR 5 and 10) in fibroblasts of SSc patients.

For the clinician, useful data have been reported regarding everyday management of SSc patients, such as the importance of Vit D and calcium supplements for preventing fragility fractures, the risk of Mg and Ca deficiency with continuous high dose PPI use in some cases, and practical algorithms for managing the difficult GIT aspects of SSc. In addition, recent data support the increasing awareness that early intervention is advisable, since much of the tissue damage such as joint contractures occurs in the first five years or so. Related to this is the early, simple, non-invasive screening for potentially serious complications such as pulmonary artery hypertension, also covered by some papers here.

This theme of early detection and diagnosis and treatment of SSc has been central to several public awareness programmes aimed at patients and primary care physicians in close collaboration with patient organisations.

The global trend of patient participation in all aspects of clinical research is reflected also in this volume; refinements in outcome measurements, such as cross-cultural validation of established instruments, and the measurement of the impact of hand and face disability on quality of life, all depend on close patient co-operation in the form of patient reported outcomes (PRO).

Finally, on the treatment front, some encouraging but preliminary data are reported regarding drugs such as endothelin receptor blockers, tyrosine kinase inhibitors and anti B cell monoclonal antibodies, but clearly larger controlled studies are required. The publication of the ASTIS trial in JAMA this year has given hope that a truly disease-modifying strategy may be possible with SSc, though currently this comes at the price of significant toxicity. One of these new developments, the emergence of new autoimmunity in the form of ANCA positive vasculitis, is reported here.

The reality-based hope is that through the increased dissemination of data and experience among colleagues in academia, clinical practice and industry, together with patients and regulators, the future for patients and their families with SSc will be brighter. This volume represents such a sharing of practical ideas on which to base this hope.