

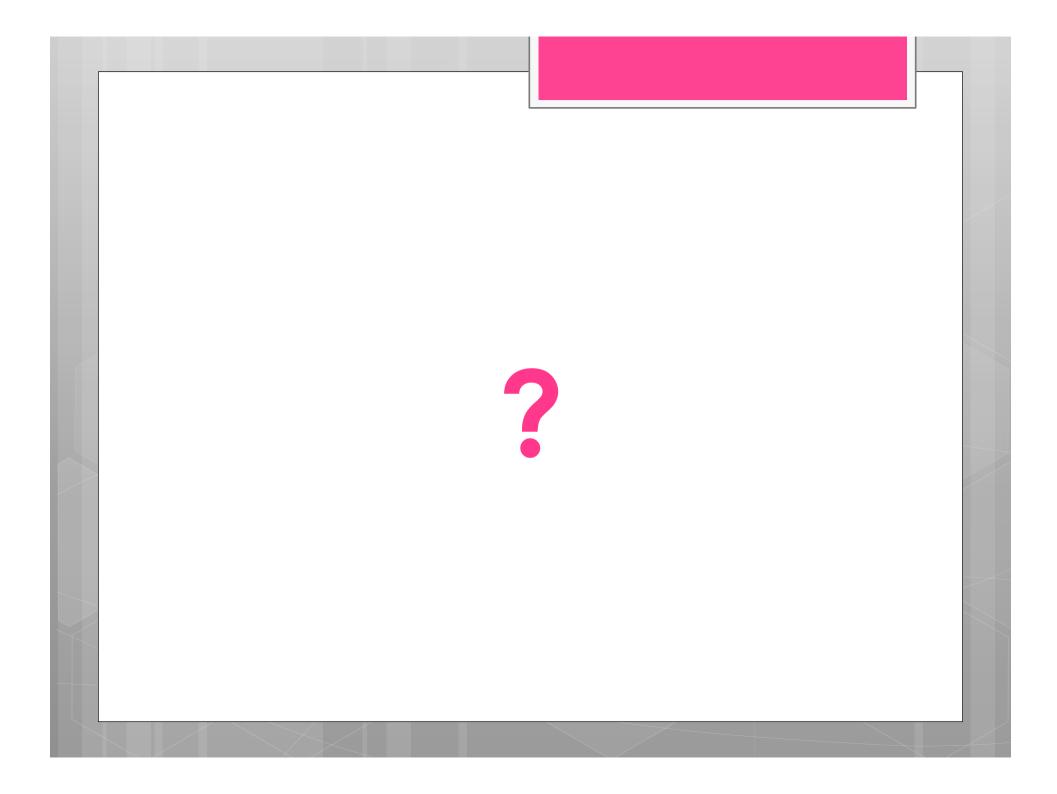
Clinical case presentation

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TUNISIA

Clinical case

- A woman 46 years old
- No past medical history
- Admitted for Raynaud's phenomenon



Physical examination

- •Blood pressure= 12/7
- Masked face
- Tapered nose
- •Puffy fingers

Investigations

- Blood samples : nl
- Chest radiography: normal
- Capillaroscopy: no megacapillaries
- Echocardiography: no hypertension lung artery
- Lung fonction testing: normal

Investigations

- Manometry: hypotonic lower esophageal sphincter
- Fibrocopy: esophagitis stage I
- anti-nuclear antibody and anti-centromere
 antibody: positive

Systemic sclerosis

Systemic sclerosis Dysphagia **Puffy Systemic** Raynaud's sclerosis fingers phenomenon positive anti-nuclear antibody and positive anti-centromere antibody.

Evolution

- 2 years later: peptic stricture of the esophagus
- Duodenal diversion surgery
- Success

Evolution

o2 months ago: mucoïd

bloody diarrhea...

Which diagnosis?

Mucoid bloody diarrheae

- Toxic
- Infection
- Hyperthyroïdism
- Systemic sclerosis
- Inflammatory bowel disease
- Cancer

- No drugs
- Stool samples
- TSH
- Coloscopy +biopsies

Diarrheae • Stool samples • TSH Hyperthyroi dism Infectious disease Chronic Cancer inflammatory bowel disease Coloscopy Coloscopy

Coloscopy



Coloscopy





Hemorrhagic Rectocolitis

Treatment

She was treated with immunosuppressive drugs (azathioprine+salazopyrin)

With success

Systemic sclerosis

Hemorrhagic rectocolitis

Discussion

- A rare case of generalized scleroderma
 associated with ulcerative colitis is presented.
- The diagnosis was easy to establish clinically and pathologically
- UC is an autoimmune disorder rarely associated with a similar underlying pathogenic mechanism

Thank you











