DOI 10.1002/acr.22957

Toward a multidisciplinary approach for systemic sclerosis: comment on the article by Baron et al

To the Editor:

We read with great interest and enthusiasm the study by Baron et al, published recently in *Arthritis Care & Research* (1). The authors demonstrated that the severity of global disease during systemic sclerosis (SSc) is associated with periodontal disease (2), mandibular erosion, and tooth loss.

The pathophysiology of SSc remains only partially understood, but several modifiable factors exist; among these, orofacial involvement may play a specific role that can lead to an increased liability to dental caries, periodontitis, and chewing disorder (3). SSc is characterized by symmetric and erosive synovitis that may result in joint irregularity and disability. Temporomandibular joint (TMJ) arthritis is a frequent finding in patients with SSc, and if not diagnosed early, can lead to facial dysmorphism and lifetime disability and pain (4).

We recently reported a detectable prevalence of symptoms and signs of dysfunction at TMJs and self-reported symptoms in SSc (limited and diffuse) patients compared to healthy subjects (5). In our sample, the Modified Rodnan Skin Score was correlated with the worsening of maximum mouth opening and TMJ dysfunction in SSc patients. In addition to our results, emerging evidence indicates that the involvement of the orofacial region during SSc is usually associated with an impaired quality of life, emphasizing the need for a specific treatment related to this kind of disability (6). For these reasons a specific disease-related questionnaire quantifying mouth disability in SSc was developed (7).

Considering the fact that 80% of SSc patients can show a wide array of oral manifestations (8), we believe that the dentist could play an important role and should be involved in a multidisciplinary diagnostic process aimed at preserving oral health during the treatment of this disease and providing correct oral pain management and clinical support for patients affected by SSc.

The orofacial involvement in SSc is often underdiagnosed. Therefore, the findings by Baron et al (1) open avenues for further research and provide recent evidence on how the health of the mouth can be important in the quality of life in SSc, as are appropriate preventive measures to prevent future complications.

Gaetano Isola, DDS, PhD, Pg/Oral Surg
University of Messina, Messina and University of Naples, Naples, Italy
Giancarlo Cordasco, MD, DDS
Giovanni Matarese, DDS
University of Messina, Messina, Italy

1. Baron M, Hudson M, Dagenais M, Macdonald D, Gyger G, El Sayegh T, et al. Relationship between disease characteristics and oral radiologic findings in systemic sclerosis: results from a Canadian oral health study. Arthritis Care Res (Hoboken) 2016;68:673–80.
2. Currò M, Matarese G, Isola G, Caccamo D, Ventura VP, Cornelius C, et al. Differential expression of transglutaminase genes in patients with chronic periodontitis. Oral Dis 2014;20:616–23.
3. Albilia JB, Lam DK, Blanas N, Clokie CM, Sandor GK. Small mouths, big problems? A review of scleroderma and its oral health implications. J Can Dent Assoc 2007;73:831–6.
4. Dagenais M, MacDonald D, Baron M, Hudson M, Tatibouet S, Steele R, et al. The Canadian Systemic Sclerosis Oral Health Study IV: oral radiographic manifestations in systemic sclerosis compared with the general population. Oral Surg Oral Med Oral Pathol Oral Radiol 2015;120:104–11.
5. Matarese G, Isola G, Alibrandi A, Lo Gullo A, Bagnato G, Cordasco G, et al. Occlusal and MRI characterizations in systemic sclerosis patients: a prospective study from Southern Italian cohort. Joint Bone Spine 2016;83:57–62.
6. Baron M, Hudson M, Tatibouet S, Steele R, Lo E, Gravel S, et al. The Canadian systemic sclerosis oral health study: orofacial manifestations and oral health-related quality of life in systemic sclerosis compared with the general population. Rheumatol Oxf Engl 2014;53:1386–94.
7. Mouthon L, Rannou F, Bérezné A, Pagnoux C, Arène JP, Foïs E, et al. Development and validation of a scale for mouth handicap in systemic sclerosis: the Mouth Handicap in Systemic Sclerosis scale. Ann Rheum Dis 2007;66:1651–5.
8. Jung S, Martin T, Schmittbuhl M, Huck O. The spectrum of orofacial manifestations in systemic sclerosis: a challenging management. Oral Dis 2016 Epub ahead of print.

Erratum

DOI 10.1002/acr.23228

In the article by George et al in the January 2017 issue of *Arthritis Care & Research* (pages 124–132), the name of the second author was misspelled. This author's name should have been shown as Andrew Wong-Pack.

We regret the error.