The First Year Scleroderma An Essential Guide For The Newly Diagnosed

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The symptoms of Scleroderma

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She provides crucial information about the nature of the disease, treatment options, diet, exercise, social concerns, emotional issues, networking with others, and much more. The First Year (TM),Scleroderma is illustrated with charts and tables, and offers an invaluable guide for everyone learning to live with their diagnosis. show more

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Scleroderma is an uncommon condition that results in hard, thickened areas of skin and sometimes problems with internal organs and blood vessels. Scleroderma is caused by the immune system attacking the connective tissue under the skin and around internal organs and blood vessels. This causes scarring and thickening of the tissue in these areas.

Scleroderma - NHS

Early diagnosis of scleroderma is very important. Read on to learn more! ... (i.e., Raynaud ' s without any underlying autoimmune condition). Primary Raynaud ' s typically first appears during one ' s teens or early adulthood. People with scleroderma tend to develop it later in life and the intensity is A LOT more severe.

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Scleroderma,a chronic autoimmune condition that causes hardening, thickening, or tightening of the skin and attacks the heart, lungs, kidneys, and gastrointestinal tract,is extraordinarily difficult to diagnose and can take a huge toll on the psychological well-being of the individual. From the first moment of her diagnosis, author Karen Gottesman took charge and educated herself on every ...

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Scleroderma—a chronic autoimmune condition that causes hardening, thickening, or tightening of the skin and attacks the heart, lungs, kidneys, and gastrointestinal tract—is extraordinarily difficult to diagnose and can take a huge toll on the psychological well-being of the individual. From the first moment of her diagnosis, author Karen Gottesman took charge and educated herself on every aspect of her condition. Now, as a "patient-expert," she guides those newly diagnosed step by step

through their first year with scleroderma. She provides crucial information about the nature of the disease, treatment options, diet, exercise, social concerns, emotional issues, networking with others, and much more. The First Year™—Scleroderma is illustrated with charts and tables, and offers an invaluable guide for everyone learning to live with their diagnosis.

Scleroderma is caused by the immune system attacking the connective tissue under the skin and around internal organs and blood vessels. This causes scarring and thickening of the tissue in these areas. Scleroderma affects women more often than men and most commonly occurs between the ages of 30 and 50. While there is no cure for scleroderma, a variety of treatments can ease symptoms and improve quality of life. There are many different types of scleroderma. In some people, scleroderma affects only the skin. But in many people, scleroderma also harms structures beyond the skin, such as blood vessels, internal organs and the digestive tract (systemic scleroderma). Signs and symptoms vary, depending on which type of scleroderma you have. There are several different types of scleroderma that can vary in severity. Some types are relatively mild and may eventually improve on their own, while others can lead to severe and life-threatening problems. There's no cure for scleroderma, but most people with the condition can lead a full, productive life. The symptoms of scleroderma can usually be controlled by a range of different treatments GET YOUR COPY TODAY BY SCROLLING UP AND CLICKING BUY NOW IN ONE CLICK

Scleroderma, which affects as many as 400,000 Americans, starts off like skin cancer but is far more deadly. This new edition is updated with new information about the best therapy for this disease, including the results of the landmark first, and a new, second clinical trial of the only therapy to report reversal and remission of this deadly disease.

Comprised of the authoritative work of international experts, this fully-updated second edition of Scleroderma builds upon the well-regarded approach in the first edition to provide integrated, concise, and up-to-date synthesis of current concepts of pathogenesis and modern approaches to management of systemic sclerosis (scleroderma). With a multidisciplinary approach to comprehensive care, this book is easily accessible for health care professionals in many fields. The new edition includes extensive updated material based on major developments in the field, with new chapters on personalized medicine, cancer complications, global perspectives on scleroderma, and more. It presents a succinct and thoughtful synthesis of current pathomechanistic concepts, providing a valuable reference tool for basic and translational investigators working in the field. Scleroderma: From Pathogenesis to Comprehensive Management serves as an essential, all-inclusive resource for rheumatologists, pulmonologists, cardiologists, gastroenterologists, nephrologists and all those involved in the care of scleroderma patients.

"The ultimate resource for patients and their families seeking to gain a better understanding of this complex disease."--Back cover.

This book presents a wide variety of cutaneous features of systemic sclerosis under one cover as cutaneous manifestations are often the first to appear and help in diagnosing this condition early. It has a multidisciplinary approach as systemic sclerosis is a multi-system disorder which comes under the purview of various medical specialties like dermatology, rheumatology and nephrology. Numerous cutaneous features are illustrated with explanatory notes. This book would help the students, teachers and professionals in identification, followed by subsequent treatment and management at an early stage. Key Features Focuses exclusively on systemic sclerosis Includes diagnostic tips Explores systemic sclerosis in dark skinned people Consists of key points at the end of each chapter Discusses diagnostic algorithms and flow charts

Chronic illness forces you to slow down and reexamine your values, your choices, and the way you define yourself. This book offers companionship throughout the process, helping you face your challenges with dignity and grace.

"Background: Interstitial lung disease (ILD) is a leading cause of mortality in

systemic sclerosis (SSc). Immunosuppressive drugs are currently used to treat ILD, but are generally ineffective for reversing established damage. A retrospective cohort study design was used to explore the effect of immunosuppressive drugs in milder forms of ILD, as well as to study the association between use of immunosuppressive drugs and risk of incident ILD, using data from patients enrolled in the Canadian Scleroderma Research Group registry between 2004 and 2017.Methods: First, SSc patients with mild ILD (i.e. baseline forced vital capacity (FVC) above 85%) (N=116) were compared according to their exposure to cyclophosphamide (CYC) and/or mycophenolate mofetil (MMF). FVC was assessed at one year using a multivariate linear regression model. Then, SSc patients without lung disease at baseline (N=1,131) were compared according to their exposure to CYC, MMF, azathioprine and/or methotrexate. Time to incident ILD was assessed using a marginal structural Cox model incorporating inverse probability of treatment weights.Results: Among SSc patients with mild ILD, the one-year FVC was higher in patients exposed to CYC/MMF at baseline compared to unexposed patients, by a difference in predicted FVC of 8.49% (95% CI, 0.01 to 16.98). Baseline FVC was identified as an effect modifier on the relationship between CYC/MMF exposure and lung disease progression. However, among SSc patients without lung disease at baseline, exposure to immunosuppressive drugs did not significantly reduce the risk of incident ILD (weighted HR: 0.78, 95% CI 0.44 to 1.37).Conclusions: These findings lend support to the hypothesis that a therapeutic window of opportunity may exist in SSc-ILD. Treatment at a stage when lung function is still normal should be

considered as a means of preventing progressive disease before significant functional compromise has occurred." --

Answers do exist for seemingly incurable diseases. The information contained in this book applies to a diverse variety of conditions ranging from ADD, Autism, Scleroderma, and MS to psoriasis and eczema. We all have the ability to reach good health by changing to the correct materials such as dental, clothing and furniture. This book follows Jane Parker's journey from the diagnosis of systemic Scleroderma, a fatal autoimmune disease, to good health. After a year of unanswered questions, numerous doctors and alternative practitioners, she finally received a correct diagnosis of Scleroderma. In researching the disease she found there was no known way to cure it. All existing information held no hope for survival and definitely none for a reversal, but this didn't stop her search to cure this deadly disease. She tried many different approaches, from conventional medicine to alternative therapies with no apparent results or answers to her problems. She finally found the answer through Victor Dyment, a Russian healer/scientist who has been doing research into the effects of different materials on health. Victor found the answers that can help reverse many diseases, not only Scleroderma. Under Victor's guidance she is the first one who has completely reversed this irreversible condition. This book describes the many steps Jane took, including the failures as well as the triumphs, in her struggle to overcome this deadly disease. This book follows Victor's research from its beginnings in Russia to the development of his Health Frequency theory and

the effects of materials on our health. With the increasing awareness of environmental health hazards this book is vital for both children and adults. By sharing these experiences and knowledge, we want to make your journey to health a lot shorter than Jane's.

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