

CALCIPHYLAXIS (CALCIFIC UREMIC ARTERIOLOPATHY)

Calciphylaxis, also known as calcific uremic arteriopathy (CUA), is a rare and serious condition characterized by the calcification of small blood vessels in the subcutaneous tissue and skin. This condition most commonly affects individuals with advanced kidney disease, particularly those undergoing

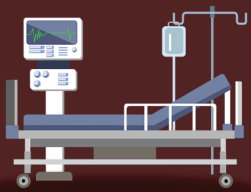
dialysis, although it can also occur in individuals without kidney disease.

Calciphylaxis has a very high mortality rate, with studies indicating that 50-80% of patients diagnosed with the condition may die within one year of diagnosis. One of the main contributors

to the high mortality rate is the risk of severe infections, such as sepsis, which can arise from necrotic skin lesions and ulcers associated with calciphylaxis. Early lesions are extremely painful and typically occur on fat-bearing areas such as the thighs, buttocks, and abdomen.

Treatment Options

Treatment is complex and multidisciplinary, focusing on managing symptoms, treating underlying causes, and preventing complications.



Wound Care

Surgical or enzymatic removal of necrotic tissue to promote healing and reduce infection risk.



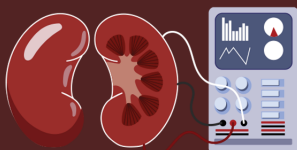
Pain Management

Use of pain medications, including opioids, to manage severe pain.



Lifestyle Modifications

Avoiding foods high in phosphate such as dairy products, nuts, and certain meats.



Dialysis Management

More frequent or longer dialysis sessions to better control calcium and phosphate levels.

Cutaneous Manifestations

The main skin symptoms of calciphylaxis include painful, red and purple skin areas that rapidly develop into black, necrotic tissue. The skin may also show mottled purplish and brownish discoloration, forming a net-like pattern, as well as the formation of black, leathery eschars (pieces of dead tissue that are typically black and hard).

