NEPHROGENIC FIBROSING DERMOPATHY (NFD): CASE SERIES OF 3 PATIENTS IN A SINGLE CENTER

Rakesh Lattupalli, Ashish Dhungel, Keith Bellovich, Robert Provenzano, Joel Topf. Division of Nephrology, St John Hospital and Medical Center, MI. Background: NFD is an acquired, idiopathic skin disorder, reported with increasing frequency in dialysis patients. A more widespread variant with involvement of other organs is described as nephrogenic systemic fibrosis (NSF). Cutaneous manifestations include thickening, and induration of skin over the distal extremities and trunk with sparing of the face. Common denominators from case reports are gadolinium exposure and renal failure. Limited data exist about its natural history, incidence and pathogenesis. Methods: We report a case series of 3 patients diagnosed with NFD at St John Hospital and Medical Center. The clinical, laboratory, and pathologic data of these 3 patients are reviewed. Results: All patients had renal disease, were exposed to gadodiamide and experienced skin changes in the month after first exposure. None of the patients were acidotic and PTH (Parathyroid hormone) levels were at goal. Time to dialysis after dye exposure was variable. One patient received higher doses of epogen and two patients had phosphorous levels above normal limits. One patient had acute kidney injury from allograft dysfunction and underwent a vascular procedure (Tunneled catheter placement) prior to gadolinium exposure. Conclusion: Our report confirms the clinical and histological characteristics of NFD that have been described previously. Renal failure and gadolinium exposure continue to be the predominant common denominators although NFD without gadolinium exposure has been reported. As available data about this condition remains sparse, the description of three cases should be a valuable addition to the scientific literature.