

**CASE OF RESOLVED CALCIPHYLAXIS IN A  
HEMODIALYSIS DEPENDENT 54 Y/O FEMALE  
AFTER IV SODIUM THIOSULFATE**

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A 54 year old African American female with multiple medical complications from diabetes and hypertension develops ESRD. She was started on hemodialysis in May, 2000. The patient had difficulty controlling her phosphorus levels despite intensive binder therapy and as a result she developed very painful bilateral multi-nodular thigh ulcerations. The lesions were biopsied and found to be consistent with calciphylaxis. On 12/26<sup>th</sup>, 2006 the patient was placed on sodium thiosulfate at 18.75mg IV, given with each session.

In February the lesions on her thighs had begun to resolve and the patient's reports of pain had subsided. The patient's sodium thiosulfate dose varied from 12.5mg to 25mg IV throughout the next 22 months at which time her exam reveals completely resolved calciphylaxis lesions. She has remained on a maintenance dose of 6.25mg and calciphylaxis free.

Discussion: Calciphylaxis is a poorly understood and highly morbid syndrome of vascular calcification and skin necrosis. The disease produces lesions typically located on the lower extremities. The lesions can develop thick, dark crusts and open skin ulcers. Diagnostic tools include blood tests and biopsies. Treatment usually begins with stopping calcium and vitamin D supplements. For patients with overactive parathyroid glands, removal may be needed. Despite aggressive treatment regimens, this condition still has a high mortality rate.

