

CALCIPHYLAXIS INDUCED BY PARICALCITOL

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Calcific uraemic arteriopathy (CUA) is a rare disease associated to end-stage chronic renal failure. The prognosis is poor due to high mortality. CUA is characterized by skin necrosis and gangrene secondary to thrombosis and calcification of small dermo-epidermal arterioles. Pathogenetic mechanisms are still unknown.

We report two cases found in two patients undergoing regular hemodialysis treatment for over ten years. The patients live and are treated in two different hospitals situated on the two biggest islands of Italy (Sicily and Sardinia). Both patients showed normal total calcium-phosphate levels with severe secondary hyperparathyroidism. These patients were correctly treated with the new therapeutic agent launched on the market for osteodystrophy -paricalcitol- as best medical practice recommends. In one patient paricalcitol was associated with calciomimetic agent cinacalcet. Despite normal calcium-phosphate product and decreased PTH levels, two months after starting treatment with paricalcitol these patients presented erythematous nodules which progressed to ulcerative necrotic skin lesions. After suspending 19-nor vitamin D treatment these skin lesions gradually improved and eventually completely healed. To date PTH levels in our patients are still high and parathyroidectomy will be performed upon consent. We stress that the incidence of calciphylaxis could greatly increase with the use of the new therapeutic agents like paricalcitol for aggressive control of secondary hyperparathyroidism.