

Dexamethasone-cyclophosphamide pulse therapy for systemic sclerosis

Sir,

This is in reference to the article 'Therapeutic trials for systemic sclerosis: An update' by Sardana and Garg.^[1] The comprehensive review needs the following references^[2-8] to be added.

It may also be added that as many as 14 dermatologists in various institutions have used dexamethasone cyclophosphamide pulse therapy (DCP)/dexamethasone pulse therapy (DP) regimen for about 300 systemic sclerosis patients^[8] and found satisfactory recoveries. DCP therapy consists of transfusing 100 mg dexamethasone dissolved in 500 ml 5% glucose over one to two hours, for three consecutive days every month, along with cyclophosphamide 500 mg on day one in the same drip and 50 mg daily, orally, in between the pulses. In DP only dexamethasone 100 mg is transfused in 500 ml 5% glucose over one to two hours for three consecutive days every month. It is used in those patients where cyclophosphamide is contraindicated.

For the information of the dermatologists, DCP / DC is able to bring about a total/almost total reversal of the changes, including skin hardening, pigmentary changes, arthritis, dysphagia, dyspnea to a variable extent, gangrene, fingertip ulceration, and even Raynaud's phenomenon, which are commonly observed in progressive systemic sclerosis patients. The total treatment is to be given for three to four years. Less doses as used by those who have found unsatisfactory results, are obviously due to inadequate treatment.

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