E-Poster
EP-637

Physical and Rehabilitation Medicine Management of Systemic Sclerosis: A Case Report

Topic: Miscellaneous

Marouane Daimi[1], Jihane Benhammou[2], Tariq Hammani[1], Mehdi Mechtoune[1], Meryem Ammari[1], Abderrahmane Jemmouj[1], Saloua Khalfaoui[1]

[1]*Service de Médecine Physique et Réadaptation Fonctionnelle, Hôpital Militaire Mohamed V de Rabat, Rabat, Morocco*
[2]*Service de Médecine Interne, Hôpital Militaire Mohamed V de Rabat, Rabat, Morocco*

BACKGROUND

Systemic sclerosis (SSc) is a rare connective tissue disease characterized by skin fibrosis and multisystem involvement, resulting in substantial functional disability. Musculoskeletal involvement, particularly of the hands, significantly limits patients' independence. Management in Physical and Rehabilitation Medicine (PRM) aims to preserve joint function, improve grasping ability and limit worsening impairments, although adherence to rehabilitation treatment remains a challenge.

CASE DESCRIPTION

We report the case of a 69-year-old woman with SSc diagnosed in 2015, presenting with severe skin involvement (skin induration and dryness), arthralgia predominantly affecting the wrists and hands, as well as sclerodactyly and Raynaud's phenomenon complicated by acro-osteolysis of the distal phalanges. Pulmonary involvement consisted of interstitial lung disease with early fibrosis (treated with cyclophosphamide for six years, followed by azathioprine), and gastrointestinal involvement in the form of erosive antral gastritis was also present. PRM management was initiated, incorporating physiotherapy and occupational therapy sessions. Physiotherapy focused on general active joint mobilization, upper and lower limb muscle strengthening, and specific hand exercises involving fine movements and functional strengthening. Occupational therapy focused on improving grasping ability through exercises involving objects of different sizes and textures, tasks simulating activities of daily living, and adaptation of movements to reduce joint stress. After 40 sessions, reduced joint stiffness and improved fine motor coordination were observed, allowing partial resumption of some functional activities.

DISCUSSION

Rehabilitation management of patients with SSc should be early and individualized to slow the progression of impairments and maintain optimal independence. One major challenge remains patient adherence to unsupervised programs. Incorporating individualized support could improve the effectiveness of interventions and promote continuity of care.

CONCLUSION

This case highlights the importance of early, personalized PRM rehabilitation management in systemic sclerosis to preserve function and limit disability. Improving treatment adherence through personalized follow-up represents a promising approach to optimizing long-term outcomes.

Statement of Disclosures

None

Doi: 10.5606/archisprm.2026.EP-637

Corresponding Author:
Marouane Daimi
Service de Médecine Physique et Réadaptation Fonctionnelle, Hôpital Militaire Mohamed V de Rabat, Rabat, Morocco
Email: daimimarouane@gmail.com