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Pulmonary hypertension impacts walking ability in SSc patients

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By Eleanor McDermid

The results of a meta-analysis show the adverse impact pulmonary hypertension has on the walking stamina of patients with systemic sclerosis (SSc).

The analysis, which included 3185 SSc patients from 43 studies, showed that the presence of pulmonary hypertension had a larger impact on 6-minute walk distance (6MWD) than the presence of interstitial lung disease (ILD).

The highest average distance was seen for SSc patients in studies that specifically excluded patients with a mean pulmonary arterial pressure of 25 mmHg or lower, at 429.79 m. Conversely, the shortest distance was found for patients in studies that recruited only SSc patients who also had pulmonary hypertension, at 283.03 m.

The average distance for all patients was 365.87 m, [the team reports in the *International Journal of Cardiology*](#). The presence of ILD also impacted 6MWD, resulting in an average distance of 388.23 m, compared with 420.12 m in studies that excluded patients with ILD.

Of note, Els Vandecasteele (Ghent University Hospital, Belgium) and co-researchers could find no studies that excluded both pulmonary hypertension and ILD, meaning there are no published 6-minute walk test (6MWT) data for SSc patients without these complications, despite most trials of pulmonary arterial hypertension (PAH) therapy using the 6MWT as a primary or secondary outcome measure to gauge treatment response.

They therefore suggest that "each SSc patient should at least once perform a 6MWT around the time of diagnosis of SSc and if possible afterwards on regular base to obtain an individual reference value that can be used as a realistic treatment goal in each SSc patient who develops PAH."

The team argues that existing treatment goals for PAH patients cannot be adopted for SSc patients, because "SSc is a heterogeneous disease and the 6MWD may be influenced by other disease manifestations."

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