

Misty Rushing

SCLERODERMA



In the fall of 2012, I began experiencing severe fatigue and shortness of breath. I thought I was just anemic, stressed and overweight, but in March 2013, I received a diagnosis of severe PAH or Pulmonary Arterial Hypertension secondary to Scleroderma (Limited Systemic Sclerosis). I began oxygen therapy and medications. The medications worked well to reduce the Pulmonary Arterial Hypertension and I was able to wean off of continuous oxygen therapy a few months later.

Throughout 2015 and into 2016, I suffered from severe GERD or Gastro-Esophageal Reflux Disease, difficulty swallowing, and chronic cough. A high resolution CT scan of the chest in February 2016 showed PF or Pulmonary Fibrosis with ILD or Interstitial Lung Disease consistent with Scleroderma. An endoscopy performed in the same month was also consistent with Scleroderma gut changes.

I searched and found Functional Medicine practitioners who created a personalized diet and nutrition program for me, I attended physical therapy, I learned healthy coping skills to reduce stress and I began prioritizing sleep. I also started seeing a psychotherapist to help cope with the changes in my life. I sought the support of complementary practices in addition to my conventional care.

Misty Rushing was a patient speaker at the ATS 2018 International Conference in San Diego, California.

“I thought I was just anemic, stressed and overweight, but in March 2013, I received a diagnosis of severe PAH or Pulmonary Arterial Hypertension secondary to Scleroderma (Limited Systemic Sclerosis).”

I am happy to report that I feel better now than I have in many years. In October 2017, with the support of my physicians, I was able to slowly wean off the three medications because the routine tests showed great improvements. My cardiologist has stated I no longer have PAH but will continue to monitor me for changes.

I started a FB group called Scleroderma and Functional Medicine a year ago which has grown to over 3,000 members worldwide. I also have a website called Scleroderma FM. www.sclerodermaf.com. ■

Scleroderma

Scleroderma, or systemic sclerosis, is a chronic connective tissue disease generally classified as one of the autoimmune rheumatic diseases. The word “scleroderma” comes from two Greek words: “sclero” meaning hard, and “derma” meaning skin. Hardening of the skin is one of the most visible manifestations of the disease. The disease has been called “progressive systemic sclerosis,” but the use of that term has been discouraged since it has been found that scleroderma is not necessarily progressive. The disease varies from patient-to-patient. Some facts about scleroderma are:

- Scleroderma is not contagious, infectious, cancerous or malignant.
- It is estimated that about 300,000 Americans have scleroderma.
- One-third of those people have the systemic form of the disease.
- Localized scleroderma is more common in children, whereas systemic is more common in adults.
- Female patients outnumber male patients about four to one.
- The onset of the disease is most frequent in people between the ages of 25 to 55.

Learn more: ATS PAR Partner, The Scleroderma Foundation. What is Scleroderma?
www.scleroderma.org/site/PageNavigator/patients_what_is.html#.WziZStJKgDU.