

Symptoms of Malnutrition

Scleroderma Foundation Michigan Chapter

There is no specific scleroderma diet since symptoms and the severity of the disease vary so greatly in each person. Establishing a balanced diet that emphasizes foods that fight inflammation and provide energy, protein, vitamins and minerals is paramount.

People who suffer from scleroderma are at increased risk of malnutrition even if they try their best to eat a healthy diet. Malnutrition in scleroderma is caused either by inadequate intake of nutritious foods or from poor absorption of nutrients from the gastrointestinal (GI) tract.

Your health care team may perform these laboratory tests to diagnose malnutrition:

Protein malnutrition: Blood tests to assess total protein, serum albumin and serum pre-albumin

Specific vitamin/mineral deficiencies: Blood tests to assess serum iron, ferritin, total iron-binding capacity, zinc and B-12

Small bowel bacterial overgrowth: Blood tests to assess serum folate, carotene, and/or vitamin D levels



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The following symptoms can also describe the underlying scleroderma and may be difficult to distinguish from malnutrition. New or worsening symptoms (such as fatigue or excessive weight loss) may indicate malnutrition.

- Unexplained weight lost (10 percent or more) during a three-month period
- Weakness and muscle wasting
- Excessive or new onset fatigue
- Increased susceptibility to infection (weakened immunity)
- Delayed wound healing
- Brittle nails and excessive hair loss
- Excessively dry and flaky skin