A 60-year-old man presented with multiple joint pain for months. He had a history of end-stage renal disease undergoing regular hemodialysis for 12 years. On physical examination, multiple large firm masses were palpable over both shoulders and hips. A radiography showed massive calcifications around both shoulders and hip (Figure 1A and B). Laboratory examinations showed a high serum calcium concentration (12.1 mg/dl), a normal phosphate concentration (4.4 mg/dl) and elevated serum parathyroid hormone concentration (1363 pg/ml). The diagnosis of hypercalcemia with tumoral calcification caused by renal failure related secondary hyperparathyroidism was confirmed. He was treated with low-calcium dialysis and his calcium concentration returned to normal promptly. However, his pain did not subside and the calcification did not improve.

Tumoral calcinosis, resulting from a deposition of calcified product in normal tissue, can develop in patients with end stage renal diseases. Many sites, such as kidney, lung, gastric mucosa, eyes, skin, vessel and joint can be involved by metastatic calcifications.\(^1\,^2\) Although several treatment modalities include increasing dialysis dosage, lower serum calcium phosphorous products, and vitamin D analogs, the response may be limited, such as our patient.

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References