

## Nailfold Capillaroscopy In Systemic Sclerosis: How Many Fingers Should Be Examined To Detect Abnormality?

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**Background:** Nailfold capillaroscopy plays an important role in diagnosing systemic sclerosis (SSc), with abnormal nailfold capillary appearance being included in the 2013 ACR/EULAR diagnostic criteria [1]. Common queries from clinicians who assess patients with suspected SSc are: which finger(s) should be imaged, and how many digits in total, given that assessing 8 fingers (excluding thumbs) takes time in a busy clinical practice? Our aim was to demonstrate the sensitivity of assessing different (combinations of) fingers for the presence of two markers of capillary abnormality: (1) presence of giant capillaries, and (2) overall image grade, compared to assessment of all 8 fingers.

**Methods:** Nailfold images (all fingers from each of 101 patients with SSc) and subsequent multi-observer assessments from a large study of quantitative capillaroscopy [2] were characterised by digit. Using custom software, observers counted giant vessels and graded the image overall (including normal/early/active/late). Patients were defined as “true case” for each of 2 parameters (giants, and image grade) if at least one of 8 fingers tested positive for the parameter (i.e.  $\geq 1$  giant vessels in one or more fingers, or one or more fingers given an ‘abnormal’ [early/active/late] grade). Seven single-finger, or finger combinations (derived from the middle and ring fingers), were then tested for sensitivity of achieving the correct result against the 8-finger “gold standard” true cases.

**Results:** For each of seven combinations of finger(s), sensitivity percentages for the two parameters are shown in Table 1. For the 8-finger “gold standard”, sensitivity against the diagnostic criteria was 53.0% (71 +ve cases from 134 assessments) and 73.1% (98 +ve cases from 134 assessments) for presence of giants and image grade, respectively. Pairs of fingers have higher sensitivity than single fingers in all cases, and the 4-finger combination shows a sensitivity of 85.9% and 91.8% for giants and image grade, respectively.

### **Conclusion:**

1. Assessing only middle and ring fingers on both hands detects abnormality in 85-90% of cases of established SSc (halving imaging time).
2. Assessing only ring fingers (sensitivity 73-80%) brings a 75% reduction in imaging time.
3. Some cases of abnormality will be missed by not examining all fingers.

### **References**

1. Van den Hoogen F, Khanna D, Fransen J, et al. *Ann Rheum Dis* 2013; 72: 1747-55.
2. Dinsdale G, Moore T, O’Leary N, et al. *Microvascular Res* 2017; 112: 1-6.

**Table 1. Sensitivity values for two nailfold capillary parameters (presence of giants, and image grade).**

<b>Finger(s)</b>	<b>Presence of giant capillaries (71 assessments from 42 patients)</b>		<b>Abnormal image grade (98 assessments from 58 patients)</b>	
	<i>Frequency</i>	<i>(%)</i>	<i>Frequency</i>	<i>(%)</i>
<i>Ring Left</i>	40	56.3	63	64.3
<i>Ring Right</i>	32	45.1	58	59.2
<i>Either Ring</i>	52	73.2	79	80.6
<i>Middle Left</i>	32	45.1	55	56.1
<i>Middle Right</i>	23	32.4	44	44.9
<i>Either Middle</i>	40	56.3	72	73.5
<i>Any Middle or Ring</i>	61	85.9	90	91.8