Prevalence of calcinosis cutis in the United States using the All of Us research database

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2	Title: Prevalence of calcinosis cutis in the United States using the All of Us research database
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48	To the Editor: Calcinosis cutis (CC) is characterized by the deposition of calcium in the skin and
49	subcutaneous tissues. It is often associated with rheumatologic diseases, most commonly,
50	systemic sclerosis (SSc)/CREST syndrome [1-3]. Pathogenesis of CC can also be idiopathic,
51	iatrogenic, or secondary to disruptions in calcium homeostasis [3]. Currently, there is a lack of
52	literature addressing the prevalence of CC. The aim of our study was to estimate the prevalence
53	of CC in the general US population using the National Institute of Health's All of Us database
54	[4].
55	
56	Our analysis identified cases of CC, SSc, and CREST syndrome using the International
57	Classification of Diseases, Tenth Revision, Clinical Modification codes L94.2, M34.9, M34.1,
58	and SNOMED codes 21323007, 89155008/299279006/298285004/128460000, 31848007,
59	respectively. Prevalence was calculated using the Wald test with a 95% confidence interval (CI).
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61	As of August 15, 2023, there were 407,333 participants in the All of Us database. CC comprised
62	107 cases (overall prevalence 0.026%; 95% CI 0.02-0.03), of which the majority were female
63	(72%). The mean and median age of calcinosis cutis patients were 60 (SD 14.7) and 62 years old
64	respectively. The mean and median ages at diagnosis were 56 (SD 14.7) and 57 years old,
65	respectively. CC was most prevalent in patients ages 55-64 (0.035%; 95% CI 0.02-0.05) (Figure
66	1), particularly in females of this age group (89.7%). Amongst the racial/ethnic groups, Asians
67	had the highest prevalence (0.042%; 95% CI 0.02-0.09), followed by Black patients (0.031%;
68	95% CI 0.02-0.05) (Table 1). Approximately half of CC patients had at least one autoimmune
69	disease (n=52, 48.6%) and 23 had a diagnosis of SSc and/or CREST syndrome (21.5%).

70	Our estimation indicates that CC affects 260 out of every million individuals in the US. Previous
71	research has examined the prevalence of CC in patients with autoimmune disorders; CC has been
72	shown to affect up to 50% of SSc patients [1, 2]. To our knowledge, this is the first large
73	population-based study to examine the prevalence of CC in the general US population.
74	Interestingly, our findings suggest that all-cause CC is most common in Asians despite their
75	underrepresentation in the All of Us database.
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77	Limitations include reliance on EMR data, which is subject to inter-provider coding variability.
78	As a result, our estimate could be an underestimation as patients without records of an ICD-
79	10/SNOMED code for CC were excluded from our calculations. Given the rarity of this disease,
80	misclassification or underdiagnosis is probable. Future studies are warranted to further
81	characterize the epidemiology of calcinosis cutis.
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Table 1. Prevalence of calcinosis cutis in All of Us across age and racial/ethnic groups

Group	Total	CC cases, n	Prevalence %	Female, n (%)
	population, n		(95% CI)	
Overall	407,333	107	0.026 (0.02-	77 (72)
			0.03)	
Age group, y				
18-44	129,508 (31.8)	16	0.012 (0.01-	9 (56.3)
			0.02)	
45-54	61,957 (15.2)	17	0.027 (0.02-	10 (58.8)
			0.04)	
55-64	82,337 (20.2)	29	0.035 (0.02-	26 (89.7)
			0.05)	
65-74	81,810 (20.1)	27	0.033 (0.02-	21 (77.8)
			0.05)	
75+	51,721 (12.7)	18	0.035 (0.02-	11 (61.1)
			0.06)	
Racial/ethnic				
group				
Asian	14,162 (3.5)	6	0.042 (0.02-	3 (50)
			0.09)	
Black	73,321 (18.0)	23	0.031 (0.02-	18 (78.3)
			0.05)	
Hispanic/Latino	73,945 (18.1)	17	0.023 (0.01-	13 (76.5)
		·	0.04)	
White	226,615 (55.6)	58	0.026 (0.02-	37 (63.8)
			0.03)	

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Journal Pre-problem

Distribution of Calcinosis Cutis Cases by Age Group

