

REPLY to letter from Mitropoulos and Klonizakis

Thank you for detailing some of the potential benefits for systemic sclerosis (SSc) from therapeutic programmes of exercise. Your letter clearly summarises the growing evidence base supporting a broad range of potential benefits for people with SSc. It is especially relevant because these benefits may directly improve functional ability and reduce debilitating symptoms. These benefits are potentially important, and the Guideline Working Group (GWG) was keen to include non-pharmacological management within scope of the updated 2024 SSc guideline [1].

The SSc guideline development followed the rigorous protocol developed by BSR that is underpinned by systematic literature review, with critical grading of evidence and structured discussion by the working group. Whilst the group recognised there are substantial potential benefits from exercise, and included a relevant statement in the full guideline, it judged the evidence level at present to falls below that needed to make a strong positive recommendation. Nevertheless, work summarised by **Mitropoulos and Klonizakis** shows how the field and evidence-base is developing. In parallel, recent studies highlight impairment in physiological increase in oxygen delivery to skeletal muscle during exercise that is independent of cardiorespiratory complications in SSc [2]. This may reflect pathological mechanisms such as microvascular dysfunction or skeletal muscle fibrosis leading to deconditioning. This further supports potential benefits of exercise to mitigate these effects.

The evidence base supporting exercise in management of SSc is growing and we very much hope that high quality published evidence will be available to warrant more robust recommendations within the broader context of non-pharmacological management in future guidelines for people with SSc. Indeed, in the future development a broader guideline specifically focused on the impact and benefits of exercise for rheumatic and musculoskeletal disorders (RMD) may be considered. It is notable that recent EULAR task force on non-pharmacological intervention for SLE and SSc endorsed exercise for SSc, whilst highlighting that cardiorespiratory status, potential risks or medical contraindications should always be considered before commencing physical exercise programmes [3].

Yours sincerely

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