

# JUVENILE IDIOPATHIC ARTHRITIS



## **DIAGNOSIS**

- 1. Arthritis in  $\geq$  1 joint for  $\geq$  6 weeks
- 2. < 16 years old
- 3. Exclusion of other disease that may cause arthritis

Arthritis ioint pain, stiffness, decreased range of motion, swelling



CLINICAL PRESENTATION					
TYPE	TYPICAL AGE	AFFECTED JOINTS	JOINT PATTERN	EXTRA-ARTICULAR FEATURES	
Oligoarthritis	< 6y	1 – 4	Asymmetric Large joints	Asymptomatic uveitis	
RF- Polyarthritis	6-7y	<u>≥</u> 5	Symmetric Any sized joints	Asymptomatic uveitis	
RF+ Polyarthritis	9-12y	<u>≥</u> 5	Symmetric Any sized joints	Rheumatoid nodules, uveitis	
Systemic Arthritis	2-4y	≥1	Any sized joints	Fever, uveitis, lymphadenopathy, rash, serositis, hepatosplenomegaly	
Psoriatic Arthritis	7-10y	<u>≥</u> 1	Asymmetric/symmetric Small-medium joints	Dactylitis, nail pitting, psoriasis, uveitis	
Enthesitis Related Arthritis	9-12y	N/A	Tendon insertions Lower extremities	Symptomatic uveitis	

#### **INVESTIGATIONS**

Diagnosis of JIA is based on clinical findings, investigations are used to rule out other conditions and may help classify type.

- CBC
- ESR/CRP
- RF, ANA
- XR, U/S, MRI, CT

Children presenting with systemic symptoms should be worked up to rule out infection/malignancy.

### **DDX**

- Infection (septic arthritis, osteomyelitis)
- Malignancy (acute leukemia)
- Growing pains
- Trauma
- Inflammatory Bowel Disease
- Juvenile Dermatomyositis
- Systemic Lupus Erythematous
- Vasculitis

MANAGEMENT				
PHARMACOLOGIC	NON-PHARMACOLOGIC			
<ul> <li>NSAIDS (ibuprofen, naproxen)</li> <li>Intra-articular steroids</li> <li>Systemic steroids (short course)</li> <li>Disease Modifying Anti- Rheumatic Drugs (methotrexate)</li> <li>Biologics</li> </ul>	<ul><li>Regular physical activity</li><li>Patient education</li><li>PT/OT</li><li>Psychotherapy</li><li>Nutrition</li></ul>			
*Management is based on type of JIA				

#### COMPLICATIONS

- Osteoarthritis
- Growth issues
- Osteoporosis
- Joint erosion Functional
- Macrophage activation syndrome
- Psychological



Referral to ophthalmology for regular screening. Untreated **uveitis** can result in blindness!