



FREQUENCY OF UVEITIS IN PATIENTS WITH JUVENILE IDIOPATHIC ARTHRITIS

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BACKGROUND

Juvenile idiopathic arthritis (JIA) is the most common rheumatologic disease in children and represents a heterogeneous group of disorders that share chronic arthritis as its clinical feature. Its management includes a periodic evaluation from the ophthalmologist, and the use of the slit lamp examination of the eyes is absolutely necessary, since JIA and anterior uveitis frequently coexist. Anterior uveitis is characterized by inflammation of the anterior chamber of the eye and is the most common extra-articular manifestation of JIA. Conversely, JIA is also the most frequent systemic cause of uveitis in children. The main purpose of this research is to study the frequency of uveitis in patients with JIA followed at the Pediatric Rheumatology Department of the Instituto de Pediatria e Puericultura Martagão Gesteira (IPPMG) - UFRJ, analyzing the complication with the therapy adopted. Other goals are to: - evaluate the effectiveness of different treatment modalities for the control of ocular inflammatory activity in these patients; compare the outcomes, duration, effectiveness and complications of uveitis treatment amongst the available options to the institute (corticosteroids, DMARDs, biologic drugs) and stratify uveitis in the studied population

MATERIALS AND METHODS

A retrospective analysis of the charts from patients with JIA attended from January to June 2019 was performed, identifying the presence of uveitis (current or past), established treatment and its effectiveness, time until healing and possible complications.

RESULTS

Of the 42 charts reviewed, 4 (9,5%) presented uveitis at least once: 2 had persistent oligoarticular JIA subtype, 1 had negative rheumatoid factor polyarticular subtype and 1 had systemic arthritis. All of them were antinuclear-antibody (ANA) positive. The uveitis arose after 1 year of JIA onset in 2 patients, after 4 years for 1 and after 5 years for 1 (25%). The 4 patients were using methotrexate at the onset of the uveitis.

CONCLUSION

Anterior uveitis is an important extraarticular manifestation of JIA and the onset may be late in the course of the disease. Periodic slit lamp examination should be performed even far from disease onset especially because of frequent silent eye involvement.