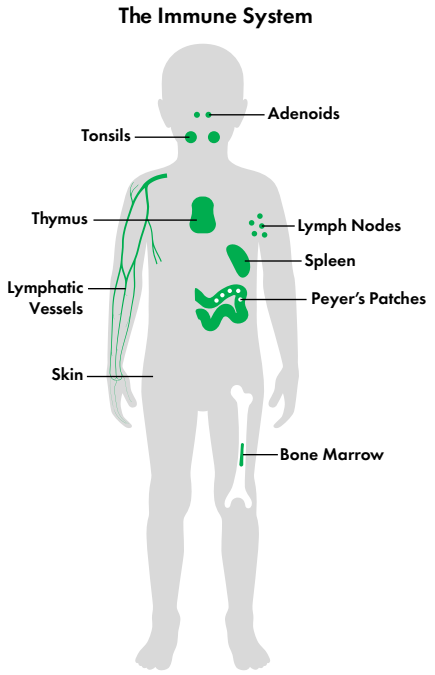
Arthritis Foundation®

Pediatric Rheumatic Diseases



About Pediatric Rheumatic Diseases

Pediatric rheumatic diseases are conditions in children 16 and under that cause the immune system to be overactive, leading to inflammation. They most often affect the musculoskeletal system — including joints, bones, cartilage, tendons, ligaments, muscles, and connective tissue — but can also involve other parts of the body, like the skin, eyes, gut, and organs. Many of these conditions are long-lasting, but with proper care and treatment, children can manage symptoms, stay active, and live full, healthy lives.

Because symptoms are sometimes dismissed or mistaken for growing pains, getting the right diagnosis can take time. Finding a pediatric rheumatologist early is key to getting a correct diagnosis and early treatment.

We don't know the exact cause, but experts think a combination of genetic and environmental factors cause them. You can't catch a rheumatic disease, and there's no evidence that foods, toxins, allergies or lack of vitamins cause them.

Common Pediatric Rheumatic Diseases

Not all pediatric rheumatic diseases cause joint symptoms. When they do, that may not be the main issue. As systemic conditions, they may affect any or all of the body's organs. Juvenile idiopathic arthritis is the most common pediatric rheumatic disease, but here are some of the others:

Systemic Lupus Erythematosus (SLE). Lupus can affect any body part, including the skin, joints, kidneys, nervous system and blood vessels. Symptoms include fatigue, joint pain, rash, fever, hair loss and mouth sores.

Juvenile Myositis. This causes muscle inflammation and weakness, mostly in the neck, shoulders, hips and core muscles. Symptoms can include rashes, typically on eyelids, knuckles, trunk, elbows or knees.

Vasculitis. This group of diseases are caused by inflammation of the blood vessels. Kawasaki disease and Henoch-Schönlein Purpura (HSP) are the most common types in kids. Both may cause joint pain and swelling and rash. There are many other rarer forms.

Juvenile Scleroderma. Scleroderma mainly involves inflammation of the skin and sometimes other organs. It can cause the skin to get tight and hard.

FAST FACTS

- Hundreds of thousands of kids and teens in the U.S. live with some form of pediatric rheumatic disease.
- More children are diagnosed with a rheumatic disease than type 1 (juvenile) diabetes.
- Juvenile idiopathic arthritis (JIA) is the most common pediatric rheumatic disease.
- Some people refer to arthritis in children as "juvenile arthritis" or "JA." Doctors don't usually use those terms.

For More Information

Juvenile Arthritis Resources
arthritis.org/JA

Helpline:
800-283-7800
arthritis.org/helpline

The information in this fact sheet was reviewed by Harry Gewanter, MD, pediatric rheumatologist, Medical Home Plus. and Melissa Mannion, MD, pediatric rheumatology, Children's of Alabama.

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In children, it usually only affects the skin. Systemic scleroderma may affect the skin, muscles, joints, lungs and other internal organs.

Diagnosing Pediatric Rheumatic Disease

No single test can diagnose a pediatric rheumatic disease. To make a diagnosis, the doctor will check the child's:

- Current symptoms
- Medical and family history
- Complete physical examination, including joints or other organ
- Lab tests for inflammation markers and more
- Imaging tests (e.g., X-rays, ultrasounds, CT scans, MRIs) if needed.

Primary care doctors can diagnose a pediatric rheumatic disease. But they often refer children to a rheumatologist for treatment. Rheumatologists specialize in treating rheumatic conditions.

Treating Pediatric Rheumatic Diseases

Treatment aims to slow or stop inflammation, relieve pain and prevent permanent joint or organ damage so the child can have a full and active life.

Medications fall into the following main categories:

- Drugs designed to change the overactive immune system, called disease-modifying antirheumatic drugs (DMARDs).
- Analgesics and nonsteroidal anti-inflammatory drugs (NSAIDs) help relieve pain and other symptoms but do not affect disease activity.
- Corticosteroid drugs, such as prednisone, reduce damaging inflammation. These are taken by mouth, through an IV, or injected into a joint with arthritis.

Many doctors recommend early treatment with powerful, disease-modifying drugs. However, everyone is different and may need different treatments. The aim is to shut down the inflammation. The doctor may add, change or stop drugs to reach their treatment goals.

FAQs

Do children outgrow pediatric rheumatic disease?

No, but they can reach remission (little or no disease activity) with the right treatment plan. Remission may be with or without medication. Flares (periods of high disease activity) may still occur and last for days or months. Getting the disease under control quickly reduces the risk of permanent joint or organ damage. It also improves their quality of life.

Is my child more likely to get sick?

These diseases and their medications may increase risk of infection, so it's very important to keep up with immunizations. Parents should talk to their child's doctor about vaccinations. Your child shouldn't get certain vaccines while taking drugs that suppress the immune system, like corticosteroids, methotrexate or biologics. Schools and other places where your child goes need to tell you know if someone there has an infectious condition. Do not stop medications unless your child's doctor says to; it could worsen disease activity.

Learning Self-Care Skills Is Key

Helping children and teens learn the importance of self-care is key to managing the disease long-term. This may include:

- Understanding their condition and how it may affect them.
- Understanding their medicines, why they are taking them and taking them as prescribed.
- Getting enough restful sleep.
- Knowing when and how to ask for help, whether it's for new symptoms or because they're struggling to cope.
- Getting regular physical activity.
- Pacing their activities so they can do things they want to do.
- Know ways to reduce stress, like deep breathing and having supportive friends and family.
- Eating a healthy, balanced diet.