

Juvenile Rheumatoid Arthritis

Juvenile rheumatoid arthritis is the most common of all forms of arthritis in children who are under 16 years of age. The condition causes persistent swelling, joint pain and stiffness. Some children might experience the symptoms for a few months, while others will continue to have them for the rest of their lives.

Some forms of arthritis can cause serious problems, such as eye inflammation and growth problems. Treating the condition is focused on improving function, preventing damage to the joints and controlling pain.

Juvenile rheumatoid arthritis happens when the body's immune system breaks down and begins attacking its own tissues and cells. Even though the cause isn't known as to why it happens, the environment and hereditary seem to play a pivotal role in the process. Certain gene mutations also make individuals more prone to factors in the environment, such as viruses, which can trigger the disease.

Juvenile Rheumatoid Arthritis Anatomy

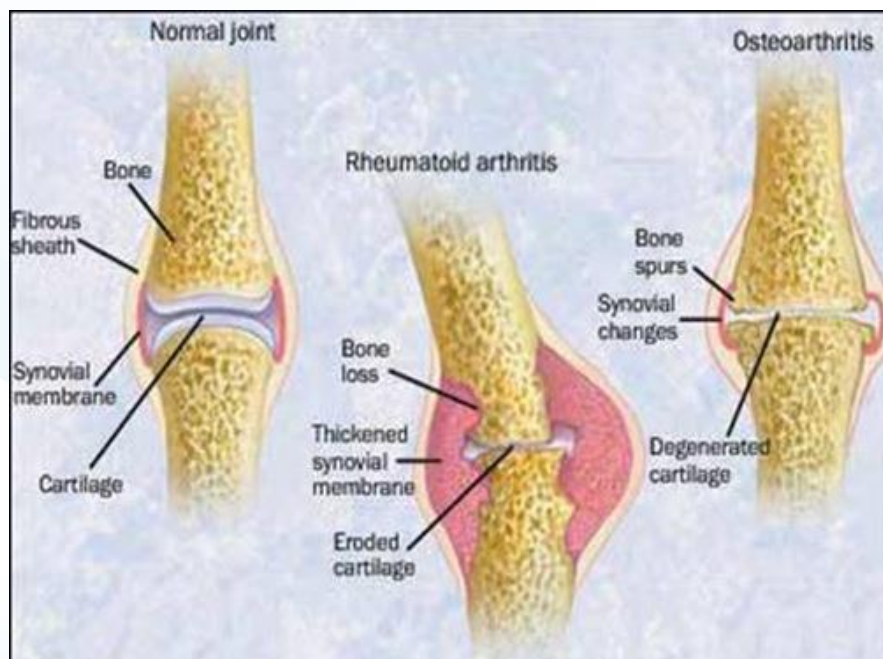
For JRA, the most critical component of the anatomy is understanding the joints. The condition affects a variety of different joints. The joints affected will vary from one patient to the next. The type of juvenile rheumatoid arthritis will determine what joints become swollen or inflamed.

Polyarticular affects the smaller joints, such as the wrist, fingers and more, although this type of arthritis can also affect the load-bearing joints, such as the knees.

Systemic affects both the small and the large joints.

Pauciarticular affects the larger joints, such as the ankles, knees, elbows and more.

The joints in the spine can also be affected by the condition. Juvenile ankylosing spondylitis affects the spine. In polyarticular JRA, the joints of the spine can be affected as well. It isn't as common for this particular type of arthritis to radiate into the upper part of the back or the lower part of the back.



How to Treat Juvenile Rheumatoid Arthritis:

1. Therapy

A physical therapist helps to keep the joints flexible and maintain muscle tone and range of movement. The therapist will make recommendations regarding the best type of protective equipment for your child and proper exercises to keep the joints active. Therapists might also recommend using splints or joint supports to protect the joints and maintain proper functional position.

2. Medications

Non-steroidal anti-inflammatory medications can help to reduce swelling and pain. You might also need to use disease-modifying anti-rheumatic drugs along with the NSAIDs to help relieve joint problems. TNF blockers reduce pain, swollen joints and morning sickness. Medications suppressing the immune system have also been shown to help the condition.

3. Activity

Under guidance from your therapist, exercises and activity will be recommended that will help to maintain joint mobility and reduce inflammation and swelling. It may be that swimming will help the child, or perhaps cycling, or some gym ball exercises. Your therapist will be able to guide you on the right exercise program at that particular stage.

Tips:

- Exercise is important because it promotes joint flexibility and muscle strength.
- Stiffness commonly affects those with the condition, especially in the morning. Applying a hot or cold pack tends to work extremely well at alleviating the stiffness.
- Adequate amounts of calcium in the child's diet is important because they are prone to developing weak bones as a result of the condition.
- Juvenile rheumatoid arthritis is commonly found in girls over boys.
- The condition can interfere with your child's bone development and growth.