

Poster presentation

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## Time of onset of iridocyclitis (IC) in children with juvenile idiopathic arthritis (JIA)

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### Background

IC is one of the most important extra-articular complications of JIA. However, little information exists on the time of onset of IC during the disease course.

### Objective

To evaluate the frequency of IC onset over time in JIA patients who developed this complication.

### Methods

1050 JIA patients seen between 1985 and 2007 were identified. 172 patients (16.4%) had IC. 6 patients with enthesitis-related arthritis with acute IC, 4 patients who developed IC before arthritis onset and 2 patients in whom date of IC onset was unknown were excluded. Of the remaining 160 patients, 108 (67.5%) had oligoarthritis, 36 (22.5%) RF-negative polyarthritis, 9 (5.6%) undifferentiated arthritis, 6 (3.8%) psoriatic arthritis, 1 (0.6%) systemic arthritis. Of the 158 patients who had ANA tested, 144 (91.1%) were positive ( $\geq 1:160$ ), 8 (5.1%) low-positive ( $\leq 1:80$ ) or doubtful, 6 (3.8%) negative.

### Results

The cumulative proportion of patients who developed IC over time is shown in figure 1 and table 1.

### Conclusion

Of 160 patients who had IC, half developed this complication in the first year, 2/3 in the first 2 years, 4/5 in the first 3 years, and only 5.6% after 7 years. This suggests that risk of IC onset is greatest in the first 3 years of disease and that the optimal time for reducing the frequency of ophthalmologic visits is 7 years after onset.

Table 1:

Time (years)	0–1	1–2	2–3	3–4	4–5	5–6	6–7	7–8	8–14
Cumulative%	48.1	68.1	78.7	84.3	87.5	91.9	94.4	96.9	100

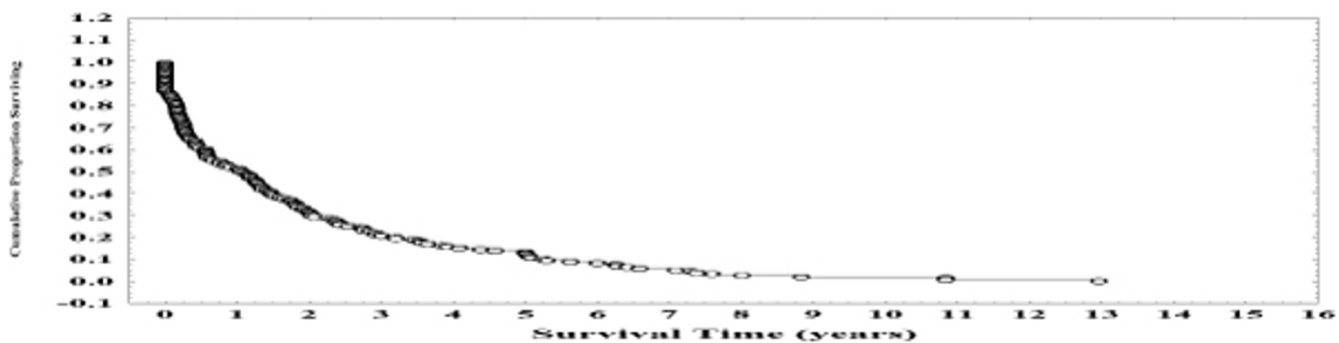


Figure 1

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