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Poster presentation

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Performance of different sets of criteria for clinical response evaluation in a non-selected cohort of juvenile idiopathic arthritis (JIA) patients

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Objective

To compare the performance of 4 sets of criteria for clinical response evaluation in JIA patients.

Methods

An observational study of a non-selected cohort of JIA patients in the out-patient clinic was conducted. Four sets of criteria: DAS, DAS28, CDAI and SDAI were evaluated and compared with the ACR-Ped-30 and the clinician judgment of response (CJR) (100 mm-VAS) as the gold standard to evaluate clinical response in JIA patients. Performance was assessed by the receiver operating characteristic (ROC) curve analysis and other statistics for diagnostic tests.

Results

50 JIA patients (female/male ratio: 1.2:1; mean age at diagnosis: 6.4 ± 3.3 years; mean disease duration: 5.3 ± 2.7 years) were evaluated. The area under the ROC curve (AUC) with 95% confidence interval (95%CI), the likelihood ratio (LR) with 95%CI, the sensitivity, specificity, positive predictive value (PPV) and negative predictive value (NPV) were: $0.842 \ (0.691-0.994)$; $6.48 \ (1.03-40.75)$; 80.9; 87.5; 97.1; and 46.6; respectively for the CJR in comparison with the ACR-Ped-30 as gold standard; and of $0.700 \ (0.532-0.868)$; $2.00 \ (1.05-3.80)$; 80.0; 60.0; $82.3 \ 56.2$; respectively for the DAS28; $0.752 \ (0.599-0.906)$; $2.89 \ (1.23-6.83)$; 77.1; 73.3; $87.1 \ 57.8$; respectively for the SDAI; and $0.705 \ (0.542-0.868)$; $2.23 \ (1.06-4.68)$; 74.2; $66.6 \ 83.8$; 52.6; respectively for the CDAI,

when compared with the CJR. The performance of the four sets of criteria in comparison with the ACR-Ped-30 was poor.

Conclusion

In the daily clinical practice the DAS 28, SDAI and CDAI can be used for the evaluation of clinical response in JIA patients.