

Psoriatic Arthritis in Children

Psoriatic arthritis is one of the seven subtypes of juvenile idiopathic arthritis (JIA).¹

Approximately 300,000 U.S. children and adolescents under the age of 16 are impacted by a form of JIA.¹⁻⁴



NEARLY 5%

of JIA cases are the PsA subtype.⁵



TWO TO FOUR

symptoms must be present for diagnosis in the absence of psoriasis: severe swelling in fingers and toes (dactylitis), nail pitting, nail separation from nail bed (onycholysis) or psoriasis in a first-degree relative.⁵⁻⁶



ABOUT 80%

of cases begin as oligoarthritis, which affects large joints such as knees, elbows and ankles.⁶

References:

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Symptoms

Common symptoms of PsA in children and adolescents include:⁵⁻⁶



Psoriasis in the form of soft plaques

Swelling of the small and large joints

Inflammation where the tendons and ligaments attach to bone (enthesisitis)

Arthritis of the lower back (sacroiliitis) or arthritis of the spine (spondylitis)

Inflammation of the eyes (uveitis)

Back pain or stiffness

Pitting or peeling of the nails

Treatment Goals

There is no cure for PsA in children. The goals of treatment are to help relieve pain and inflammation, prevent long-term complications and joint damage, and slow or stop disease progression.^{7,8}

Most treatment plans involve a combination of the following:⁷



Doctor visits



Medications



Physical and occupational therapy



Nutrition counseling