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Juvenile Rheumatoid Arthritis

By: [Peter Emerson](#) ★

Rheumatoid arthritis is a disease that attacks the joints in the body, causing inflammation and pain. It can affect anyone at any age. Children are no exception to rheumatoid arthritis. In children, this chronic disease is called as juvenile rheumatoid arthritis, and it also causes inflamed and stiff joints.

Juvenile rheumatoid arthritis mostly affects children below the age of 16. Unlike the rheumatoid arthritis of adults, juvenile rheumatoid arthritis is a group of several diseases. The only common characteristic of the adult and child rheumatoid arthritis is the “inflammation of joints and pain”.

Juvenile rheumatoid arthritis is a collective disease. The three identified forms are pauciarticular, polyarticular and systemic. In pauciarticular juvenile rheumatoid arthritis, a child may suffer from inflammation in few joints such as the knee and shoulder. If it is polyarticular, then many joints get inflamed simultaneously, for example knees, wrists, elbows, and so on. Polyarticular rheumatoid arthritis attacks symmetrically; for example, the joints of the left and right hand become inflammation at the same time.

Unlike pauciarticular and polyarticular, in systemic cases, parts of the body become affected along with the inflammation of some organs. Skin rashes, fever, inflammation of the joints and internal organs such as the spleen and liver may accompany systemic disease.

The cause of the disease is unknown, even in the case of juvenile rheumatoid arthritis. The child complaining of joint pain is often examined to confirm for rheumatoid arthritis. The symptoms include difficulty to get up after sitting down, pain in the mornings while waking up—everything that is caused by the stiffness and swelling of the joints. They are also asked for a family history of rheumatoid arthritis. Once the disease is suspected, preliminary tests are conducted to understand the intensity of the disease. On the basis of the test results, the child is given treatment and medication. While some have an easy recovery, others suffer from more complicated symptoms. Sometimes, in some children, the symptoms of juvenile rheumatoid arthritis remain dormant for a period of time. It may suddenly emerge or “flare up” when the child least expects it.

[Rheumatoid Arthritis](#) provides detailed information on Rheumatoid Arthritis, Rheumatoid Arthritis Symptoms, Juvenile Rheumatoid Arthritis, Rheumatoid Arthritis Treatments and more. Rheumatoid Arthritis is affiliated with [Arthritis Pain](#).

Juvenile Rheumatoid Arthritis: A Basic Understanding

By [Sandra Kim Leong](#) ★

As the name implies, juvenile rheumatoid arthritis is a type of arthritis that primarily affects the young. Children as young as six months can be diagnosed with juvenile rheumatoid arthritis. In the United States, approximately 75,000 young people have this debilitating condition.

Like rheumatoid arthritis in adults, juvenile rheumatoid arthritis is essentially an autoimmune disease. This is a syndrome whereby the body produces antibodies that attack its own joint tissues. Currently, medical researchers have not determined that exact cause of juvenile rheumatoid arthritis. However, there are several theories as to how juvenile rheumatoid arthritis can happen.

The most popular hypothesis is that juvenile rheumatoid arthritis is caused by the inability of the body to differentiate between its own tissue and foreign invaders, such as viruses and bacteria. Ironically, juvenile rheumatoid arthritis may actually be the result of the effort of the body to defend itself against disease.

There are three categories of juvenile rheumatoid arthritis: polyarticular, pauciarticular, and systematic juvenile rheumatoid arthritis. These three categories have different symptoms and require different appropriate treatment.

Polyarticular juvenile rheumatoid arthritis occurs when swelling is present in at least five joints throughout the body. Most of the affected joints are those described as weight bearing joints, which include joints in the hands, neck, hips, knees, and ankles. Weight bearing joints are those that receive the brunt of the pressure and weight that is endured by the body.

Pauciarticular juvenile rheumatoid arthritis refers to a form of the disease that tends to affect four or less joints. Pauciarticular juvenile rheumatoid arthritis symptoms include swelling, stiffness, discomfort or severe pain around the afflicted joints. Most often, pauciarticular juvenile rheumatoid arthritis affects the joints of the wrist and knee. A key distinguishing feature of pauciarticular juvenile rheumatoid arthritis is that it may also affect the eyes. The iris may become inflamed. In most cases, ophthalmologists are often among the first to diagnose cases of pauciarticular juvenile rheumatoid arthritis.

Systematic juvenile rheumatoid arthritis refers to the fact that the disease may sometimes affect the whole body. This happens when the immune system becomes weakened by the disease. Children afflicted with systematic juvenile rheumatoid arthritis may experience fevers, rashes, in addition to the feelings of joint stiffness and overall pain and discomfort. Other symptoms that are specific to the systematic form of juvenile rheumatoid arthritis include the enlargement of the lymph nodes and the spleen.

Juvenile rheumatoid arthritis treatment usually involves the use of NSAIDs class drugs. These are non-steroid anti-inflammatory drugs that are often prescribed to treat the symptoms of juvenile rheumatoid arthritis. Those who are afflicted are also encouraged to undertake appropriate exercise as it is important to retain their natural range of motion and flexibility, particularly in the synovial joints. In cases of juvenile rheumatoid arthritis, high impact and weight bearing sports like tennis and running are best avoided.

Sandra Kim Leong writes on [common symptoms for rheumatoid arthritis](#). Her site contains information and resources on arthritis treatment, arthritis symptoms and diet for arthritis. Please visit her blog at <http://www.rheumatoid-arthritis-relief.com> for more updates.

Explaining Juvenile Rheumatoid Arthritis

By: [Veronika Lepinski](#)

Arthritis has always been erroneously thought of as a condition that affects the elderly. Unfortunately, it does affect the children as well. Juvenile Rheumatoid Arthritis most commonly affects children. Though it is generally mild, causing hardly any problems, in severe cases it causes damage to the joints and the tissues. Juvenile rheumatoid arthritis causes inflammation of the joints, stiff and bent joints, damage to the joints, and change in the growth. As is the case of Ankylosing Spondylitis, children suffering from juvenile rheumatoid arthritis also suffer from stiffness of the joints in the morning on waking up, or after a prolonged period of rest.

However, juvenile rheumatoid arthritis too, affects different children differently, and not all children may experience all these symptoms. Even the degree of severity of a particular symptom may vary from children to children. Even in the case of the same child, the symptoms may vary from one day to another.

Juvenile Rheumatoid Arthritis – Its Types

Juvenile rheumatoid arthritis cannot be diagnosed by any single test. A series of tests may be required to diagnose this form of arthritis and only after persistent presence of symptoms for at least 6 weeks, to rule out other possible medical conditions. A pediatric rheumatologist is an expert who specializes in arthritis in children, and may be required to treat children with juvenile rheumatoid arthritis.

There are three major types of juvenile rheumatoid arthritis, and it usually takes 6 months to determine the type a child suffers from. These three types are:

Pauciarticular juvenile rheumatoid arthritis

Polyarticular juvenile rheumatoid arthritis

Systemic onset juvenile rheumatoid arthritis

Pauciarticular juvenile rheumatoid arthritis affects a few joints, as little as four, or less. Half the children with juvenile rheumatoid arthritis have this type of arthritis, and usually the joints of the knees, ankles, and elbows are affected. Joints of the wrists, spine and finger or toe joints are rarely, if at all, affected. It normally affects joints on one side of the body and not both sides.

One particular type of Pauciarticular arthritis affects girls less than seven years of age, and in 33 percent of the cases inflames the eye. The other type affects boys eight years old and older, and affects the sacroiliac joints, ankles, hips, and knees, among others. They may suffer from redness and pain in the eyes, as well.

Polyarticular juvenile [rheumatoid arthritis](#) affects five joints or more. It affects the girls more than boys, and mainly teenagers. This type normally affects the hands and the finger joints, but can also affect the neck, jaw, hips, knees, and ankles. If affecting the spine, the child may find it difficult to turn the head due to stiffness in the neck.

Systemic onset juvenile rheumatoid arthritis is the least common but affects both boys and girls alike. It is associated with inflammation of the internal organs. Symptoms may include daily fever as high as 103 degree and above, lasting for weeks or months. Inflammation and joint pain may, or may not, accompany the fever initially, but may appear months later.

Veronika Lepinski is the author of [Specialist Arthritis](#), a trusted source of information about [rheumatoid arthritis](#) & treatments.

Juvenile Arthritis - Unknown Causes

By: [Peter C Johnson](#) ★

Juvenile arthritis is the term given to arthritis which effects younger generations, even children. Arthritis is obviously more common in older persons where wear and tear, injury and joint inflammation are clear factors in terms of cause. This condition has its own specific set of symptoms and causes.

Juvenile arthritis has recently been termed 'juvenile idiopathic arthritis', because there is currently no known active reason or cause for the condition. It has however been suggested that genetics and environmental factors may play a significant role in the appearance of this condition.

Juvenile arthritis is very unique in comparison with more common forms of adult arthritis, and forms which affects children until they reach adulthood. This condition has no obvious symptoms which a doctor can easily diagnose, further to this it may be quite difficult for the child suffering to communicate the pain they are feeling. There are some basic signs which are evident in children suffering from juvenile arthritis: reduced interest in exercise, lethargy, decreased appetite, 'limping' movements, and swollen joints specifically in the wrist, hands, knee, ankle and feet.

Juvenile arthritis has been classified into 3 categories: oligoarticular, polyarticular, and systemic.

Oligoarticular only affects 4 or less joints, polyarticular affects 5 or more joints and usually involves smaller joints such as the neck and jaw, and finally systemic affects joints that rely on internal organs to function. This last type is specifically hard to diagnose, and the symptoms may come in the form of a rash which comes and goes. The only real means to diagnose which form your child has is via medical imaging in the form of an X-Ray or MRI.

Treatment for this difficult condition is possible through therapy and medication. The first step for treatment is to contact your doctor or physician. [Juvenile arthritis](#) is specifically delicate as it involves children, so communication becomes an issue, and it is always better to be cautious if any symptoms present themselves. Early diagnosis is the key to treatment, so if your child complains of any possible symptom, take them to your doctor/physician ASAP. It will be better to preferably rule out juvenile arthritis earlier as a cause for your child's symptoms.

Want further information on arthritis treatment and pain relief? Please visit:

<http://www.arthritis-treatment-advice.com>

Looking for a cure for your arthritis? Please visit:

<http://www.arthritis-treatment-advice.com/Products.html>

Types of Juvenile Arthritis

By: [Michael Russell](#) ★

Juvenile arthritis, also known as juvenile chronic arthritis, childhood arthritis and juvenile idiopathic arthritis, has five different subtypes, or classifications, depending on the symptoms found within the first six months of diagnosis. These classifications are pauciarticular, polyarticular, systemic onset, spondyloarthropathy and psoriatic juvenile arthritis. Juvenile arthritis was once referred to as juvenile rheumatoid arthritis but the 'rheumatoid' was dropped as part of the name because it leads people to believe this disease is similar to rheumatoid arthritis in adults, which it is very different from in terms of symptoms, course of the disease and future outlook of the disease.

Pauciarticular juvenile arthritis affects less than four joints, usually the ankle, knee, elbow, or wrist and is the most common type of juvenile arthritis. This particular subtype affects around 45% of children diagnosed with juvenile arthritis, very few of which develop general, or body-wide, symptoms. Pauciarticular juvenile arthritis sufferers rarely experience bone growth problems or deformed joints, which may be associated with other types of juvenile arthritis. Some children with juvenile arthritis develop inflammation of the eye, known as uveitis, which can lead to blindness if it isn't treated promptly. Pauciarticular juvenile arthritis will sometimes disappear within a few years, but many children will experience cycles of remission and flares for the rest of their life.

Polyarticular juvenile arthritis affects about 40% of children diagnosed with juvenile arthritis and it affects more girls than boys. This subtype of juvenile arthritis affects children with a huge age gap and it is rarely first diagnosed between age three and ten. Polyarticular juvenile arthritis affects at least five joints at the same time, usually the small joints of the hands and feet, although the knee has been known to be affected as well. When the knee is affected by juvenile arthritis, the bones in the leg will begin to grow at different rates and one leg will become longer than the other. This can lead to arthritis in the hip or spine, which around half of all children diagnosed with this subtype of juvenile arthritis will develop. Polyarticular juvenile arthritis presents with general symptoms, such as decreased appetite, slight fever and a slight rash. Polyarticular juvenile arthritis is usually most severe in children who were primarily diagnosed after age 10 and they may test positive for rheumatoid factor. This is a marker found in other autoimmune disorders, including adult rheumatoid arthritis. If a child does test positive for this marker, they are more likely to develop deformed joints and many doctors consider this subtype of juvenile arthritis adult rheumatoid arthritis that occurs at an early age.

Systemic onset juvenile arthritis is sometimes called Still disease after the doctor who first described it. This subtype of juvenile arthritis occurs in approximately 10% of juvenile arthritis patients and affects boys and girls equally. Primary diagnosis is usually

made between 5 and 10 years of age and may be difficult to diagnose accurately because the initial symptoms do not affect the joints. The initial symptoms are usually found with some type of infection, high fever, swollen lymph nodes, rash, loss of appetite and subsequent weight loss. Occasionally children with this subtype of juvenile arthritis will develop more serious complications, inflammation of the sac surrounding the heart (pericarditis), inflammation of the heart itself (myocarditis) and inflammation of the tissue lining the chest cavity and lungs (pleuritis). However, systemic onset juvenile arthritis rarely includes inflammation of the eye as seen in pauciarticular juvenile arthritis. When arthritis symptoms do begin to appear, often later in the course of this disease, they usually affect the wrists or ankles. Many of the children diagnosed with systemic onset juvenile arthritis will experience cycles of remissions and flares of the systemic symptoms throughout their childhood. Systemic onset juvenile arthritis sufferers will go on to develop polyarticular juvenile arthritis.

The final two subtypes of juvenile arthritis, spondyloarthropathy and psoriatic juvenile arthritis are rare. Spondyloarthropathy usually affects boys over the age of eight. It begins in the knees and ankles, slowly moving to include the lower spine and hips. Sometimes uveitis occurs, but resolves on its own. Psoriatic juvenile arthritis affects less than four joints in the beginning, but soon advances to other joints. The toes, hips, spine and fingers are the main joints affected by this subtype of juvenile arthritis. Children with this subtype of juvenile arthritis often suffer from psoriasis and have pits or ridges on their fingernails. This arthritis often disables the child.

Michael Russell Your Independent guide to [Arthritis](#)

Different Types of Arthritis in Children

By: [Jason Hobbs](#) ★

Arthritis diseases are developed especially among the children. But, it may occur to anyone at any age. Rheumatology College in America estimates that one out of 1000 children are vulnerable to juvenile arthritis. There are many different types of arthritis that are found in children. It is still not discovered what actually causes such different types of arthritis in children, hence at present prevention is also unfeasible.

Juvenile Rheumatoid Arthritis:

One of the most common amid the various different types of arthritis is juvenile rheumatoid arthritis (JRA). It is the dreadful disease that occurs mostly in children and it is popularly referred as juvenile idiopathic arthritis. The indications of such diseases are stiffness and joint pain, similar to adult arthritis. But, this indication commences to assemble in those children who are below the age of 16. The treatment differs with each child and the indications also differ in stiffness.

Systemic inception Juvenile Rheumatoid Arthritis:

The other different types of arthritis comprises of systemic onset juvenile rheumatoid arthritis. These different types of arthritis disease are developed mostly in children. It primarily starts with fever of 103 degrees Fahrenheit and above, which comes up and goes down. Often most, this type of fever is associated with a strange itchiness, which frequently arises and vanishes. Normally, systemic onset juvenile rheumatoid arthritis does not occur with fevers or rash, but occurs years later. However, there are cases, where the arthritis pain experienced was at the time of fever. Systemic onset juvenile rheumatoid arthritis not only inflames the child's joints, however it can possibly inflame the internal organs too. Often, the child feels weakness along with high WBC count. At such time, treatment method contains analgesics, other medicines, along with observation of the children's diet and usual physical activities.

Pauciarticular JRA:

This is the one of the common and different types of arthritis mainly observed in children. It is estimated that less than ½ of the arthritic children's are vulnerable to the Pauciarticular JRA. It occurs in girls more as compared to boys. Pauciarticular JRA normally attacks to at least 5 joints of a child's entire body. The side-effects of these different types of arthritis can be a permanent loss of vision or persistent eye troubles. It is an old fact that the children's of the age 7 or below who are diagnosed with these different types of arthritis are expected to recuperate effectively.

Polyarticular JRA:

These different types of arthritis are similar to the above mentioned one, excluding the effects. In case of Polyarticular JRA, it affects five joints of child's body. More often, this attacks the kids at any age. It can be treated with usual physical activities, drugs and standard check ups.

If you would like to learn more about the causes and problems of [Arthritis](#) and receive a FREE Newsletter on the subject visit the authors site <http://www.arthritiselpadvice.com>

Juvenile Arthritis Is A Big Challenge For Little People

By: [Jason Hobbs](#) ★

Often people consider their childhood as the most fantastic period of their lives. Each and every occasion such as learning the technique of riding bicycle, watching father repairing car engine seems to be new and more exciting. At this age, the troubles with regards to future are not sensed and it is believed that each day will be as jovial as the present day. Sickneses as such, chicken pox, mumps and measles are considered to be an integral part of childhood. But, more serous sicknesses such as juvenile rheumatoid arthritis can be tremendously challenging for both boys and girls.

Juvenile Rheumatoid Arthritis: Most of the people, based on their personal experiences know about the arthritis disease. Arthritis is a brutal situation, where the individual's joints and bones become painful and swollen. However, many forms of arthritis subsist, including juvenile arthritis or juvenile rheumatoid arthritis (JRA). This disease mainly affects the children aged 16 years or even younger. These children suffer severe stiffness and swelling experience for approximately more than six weeks. There are three kinds of juvenile arthritis and they are symptoms based.

Usually, half of the children affected with juvenile arthritis mostly suffer from Pauciarticular Juvenile Rheumatoid Arthritis. In this case, a maximum of 4 joints are severely affected. Those girls who are less than eight years of age are more vulnerable to this kind of juvenile rheumatoid arthritis, which usually affects the huge joints viz. knees.

Subsequently, nearly one third of all children affected with juvenile arthritis have Polyarticular Juvenile Rheumatoid Arthritis. This disorder affects a minimum of 5 joints. In case of Polyarticular Juvenile Rheumatoid Arthritis, smaller joints such as hands and feet are affected. The significance about this kind of Arthritis is that, it affects the both halves of the identical joint in the child's body.

Finally, besides joint inflammation, systemic Juvenile Rheumatoid Arthritis causes fever and minor skin soreness and may involve inner organs such as heart, liver and spleen. It is estimated that 20% of all kids who endure from juvenile rheumatoid arthritis have systemic JRA.

Causes of Juvenile Arthritis: The three types of juvenile rheumatoid arthritis are autoimmune diseases. In other terms, the child's body mistakes in assorting some of its own cells and tissues as alien. The outcomes are that, the child's body immune system begins to attack the healthy cells and tissues. Scientists consider that both genetic and environmental factors cause this kind of juvenile arthritis in youngsters. There are several symptoms revealing that a kid endures from juvenile arthritis. Its symptoms comprises of constant inflammation on joints, constant stiffness, irritation of eye, frequent pain, growth

problems, lung and heart problems, skin rashes and high fever, problems in hands, feet and knees and lymph nodes swelling.

Treatment: Once a kid has been identified with juvenile rheumatoid arthritis, many types of treatment are available to cure. They consist of physical therapy, complementary and alternative medicine, corticosteroids, biological agents, anti-rheumatic and inflammatory drugs such as ibuprofen and aspirin. Childhood disorders such as, juvenile rheumatoid arthritis are very difficult for the child to suffer. But, as the treatments and diagnoses improve, youngsters can better cope-up with this disorder and continue to cherish their childhood.

If you would like to learn more about the causes and problems of [Arthritis](#) and receive a FREE Newsletter on the subject visit the authors site <http://www.arthritiselpadvice.com>

Arthritis - Coping With Juvenile Rheumatoid Arthritis

By: [Hilary Basile](#) ★

Juvenile rheumatoid arthritis (JRA) is the most common type of childhood arthritis. It causes joint inflammation for at least six weeks in children 16 years old or younger. Doctors believe that JRA is an autoimmune disorder meaning the body's immune system attacks its own cells and tissues. It is not known why this happens, but both heredity and environment seem to play a role. In most cases, symptoms of JRA may fade after several months or years.

A virus or bacterium may cause the development of juvenile rheumatoid arthritis in children with certain genetic profiles. These genetic profiles are detected in some children with JRA and are considered genetic markers. However, not all children with the markers develop JRA, and children without the markers can develop the condition.

Children with juvenile rheumatoid arthritis should live life as normally as possible by attending school and participating in extra-curricular and family activities. To foster a healthy transition to adulthood, adolescents with JRA should be allowed to enjoy independent activities, such as taking a part-time job and learning to drive. Provide your child with opportunities to interact with other children who also have arthritis in or near your community. Ask your rheumatologist about summer camps and other available group activities.

Treatment of juvenile rheumatoid arthritis focuses on physical activity to maintain full joint movement and strength, preventing damage and controlling pain. Continued physical activity will help prevent loss of function. Therapists may construct splints to prevent joint contractures or deformity, and work with school-based therapists to address issues at school.

Parents should be familiar with Federal Act 504, which may provide children with juvenile rheumatoid arthritis special accommodations at school. Families with children with JRA may be eligible for assistance through state agencies or services such as vocational rehabilitation. They may also benefit from information and activities available through the American Juvenile Arthritis Organization.

Hilary Basile is a writer for MyGuidesUSA.com. At <http://www.myguidesusa.com>, you will find valuable tips and resources for handling life's major events. Whether you're planning a wedding, buying your first home, anxiously awaiting the birth of a child, contending with a divorce, searching for a new job, or planning for your retirement, you'll find answers to your questions at MyGuidesUSA.com.

Find tips and resources on rheumatoid arthritis, juvenile arthritis, hip arthritis, knee arthritis and osteoarthritis at <http://arthritis.myguidesusa.com>

What Causes Childhood Arthritis?

By: [David Chandler](#)

Childhood arthritis is a disease that occurs in children under the age of 16. It causes pain, stiffness, and swelling in one or more of the joints. This pain, stiffness, and swelling are called inflammation. With childhood arthritis, the inflammation lasts longer than six weeks, and is not caused by an injury or other illness. Childhood arthritis is also called juvenile arthritis.

How common is childhood arthritis? It affects 1 in 1,000 US children under the age of 16. Both boys and girls are affected by childhood arthritis. Arthritis is not just a disease of old people. In fact, approximately one in 1,000 children under the age of 16 suffers from arthritis. Juvenile arthritis is among the most common chronic childhood disorders.

What causes childhood arthritis?

The exact cause of childhood arthritis is unknown. Childhood arthritis does not usually run in families and cannot be passed from one person to another. The onset of childhood arthritis may follow an infection or injury, but these events do not cause the arthritis. With childhood arthritis, the body's immune system stops working properly. The immune system's job is to fight off germs and disease. However, in a child with childhood arthritis the immune system attacks healthy tissues. What triggers this process is unknown.

What can you do about childhood arthritis? If your child has inflammation, in one or more joints for more than six weeks your doctor may perform a physical examination of your child and order tests, such as x-rays and blood tests to find out what is causing the inflammation. There is not just one single symptom, sign, or test that will give a diagnosis of childhood arthritis.

If your doctor thinks your child has childhood arthritis, he or she will usually refer your child to a rheumatologist (pronounced room-a-tol-o-jist). A rheumatologist is a doctor who has received special training in the diagnosis and treatment of problems involving inflammation of the joints, muscles and other parts of the body.

For more information, visit <http://www.ArthritisInfoCenter.com>

Juvenile Arthritis (Part 1) Why Does Arthritis Affect Children?

By: [Wendy Owen](#) ★

Many people wonder why children can develop arthritis. It hardly seems fair. Kids haven't spent years rushing around a football field or spent their working lives laying concrete...

Juvenile arthritis (JRA) is not a disease of wear & tear. JRA can be genetic disease, affecting children whose immune system is prone to viral attack. In fact Juvenile Arthritis is actually a group of diseases which affect children

There are three main types of Juvenile arthritis (or Juvenile Chronic Arthritis). **Pauciarticular, Polyarticular and Systemic**. In this article we'll concentrate on Pauciarticular juvenile arthritis.

The most common form of juvenile arthritis is Pauciarticular Juvenile Arthritis. This accounts for more than half the cases of arthritis in children. This disease seems to affect girls more than boys and usually affects the larger joints knees, ankles, elbows, and hips, these joints can become swollen and painful. It affects younger children, mainly under the age of four.

Pauciarticular juvenile arthritis can also affect the eyes and should be watched carefully by an eye specialist as significant eye damage can occur as a result.

Watch your child carefully if he or she develops a limp. This can be the first sign your child has developed Pauciarticular juvenile arthritis. An accurate diagnosis unfortunately can't be given much before six weeks, however medical attention should be sought as soon as there is any suspicion your child may be affected. This is most important to rule out other diseases with similar symptoms such as rheumatic fever.

The treatments typically offered are those that reduce pain and inflammation for example aspirin. Although aspirin is better tolerated by children than it is by adults, it isn't without side effects.

Pauciarticular juvenile arthritis can respond well to natural arthritis treatments too. Try Omega 3 oils (found in oily fish or in capsule form) and see if this can lower the dose of your child's medication while still maintaining their comfort level. A good diet with all the main food groups will help too.

Exercise is vital to prevent stiffness and maintain your child's health. Exercise which doesn't further irritate the joints is the best. Swimming is excellent for this, stretching exercises are great too. If the whole family joins in it can be fun! Exercise releases endorphins into the body, endorphins are a natural antidote to pain and depression.

Juvenile arthritis is unique in that a child's joints are still growing and developing, a large part of treatment is making sure this happens as normally as possible and to monitor this growth.

And now for some good news at last. Many cases of Pauciarticular juvenile arthritis can spontaneously disappear as you child grows older. This has to be the best outcome of all!

This article is not intended to replace medical advice. Always seek medical advice for any childhood disease.

Visit <http://www.natural-arthritis-medication.com/juvenile-arthritis.htm> for more information on juvenile and other types of arthritis. The author Wendy Owen is a natural health writer and researcher. Join our list and receive a free 6 part arthritis mini course.

Juvenile Arthritis (part 2) Polyarticular and Systemic Juvenile Arthritis

By: [Wendy Owen](#) ★

What is Polyarticular Juvenile Arthritis?

Polyarticular Juvenile Arthritis is a type of arthritis that affects children between twelve and sixteen years of age. This disease affects roughly one third of Juvenile arthritis sufferers and mainly targets females. The joints affected are usually evenly distributed between the right and left sides of the body.

For instance if the right foot is affected, the left foot is typically also affected. The joints affected in polyarticular juvenile arthritis are usually the smaller joints for instance the finger joints, however in some cases the larger joints such as the knee or hip joint are also involved. This form of juvenile arthritis also involves more joints than the more common pauciarticular form, at least five or more joints can be swollen and painful.

A few children with polyarticular juvenile arthritis may have the rheumatoid factor in their blood (RH) which means the disease can manifest as rheumatoid arthritis later in life, but fortunately most will grow out of it.

Systemic Juvenile Arthritis is a more serious form of the disease and it is this form that is most likely to continue into adulthood.

Children with systemic juvenile arthritis can have several joints that are swollen and painful. There may also be a fever which lasts about two weeks. The fever is usually worse in the afternoon and evenings. Systemic juvenile arthritis accounts for about 20% of juvenile arthritis sufferers.

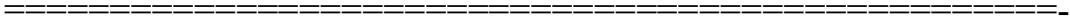
Children with systemic juvenile arthritis may also have a pink rash that appears on the thighs and lower body.

Systemic juvenile arthritis can also affect the lymph system and internal organs, such as the heart and liver. On the other hand, few children with the systemic form carry the RH factor which can develop into rheumatoid arthritis.

Arthritis in children can vary from day to day. Make the most of the days that your child is feeling better. It's important that they get enough exercise to build their muscles and ensure healthy growth.

Meanwhile research continues into this disease on all levels. Finding the cause, new medications and other treatments. Natural arthritis treatments are fine to use for children and can help them and their parents find other options for treating this disease. Meanwhile try to ensure your child has a normal a life as possible and remains as carefree and happy as possible.

Visit <http://www.natural-arthritis-medication.com> your resource for information on natural remedies for arthritis. The author Wendy Owen is a natural health writer and researcher. Join our list and receive a free 6 part arthritis mini course



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A handwritten signature in blue ink that reads "Stacynth Allen". The signature is written in a cursive style with a large initial 'S'.

