

JUVENILE IDIOPATHIC ARTHRITIS DENGAN PERAWAKAN PENDEK

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Abstrak

Latar Belakang: Juvenile idiopathic arthritis (JIA) lebih jarang terjadi pada pasien laki-laki dibandingkan pada pasien perempuan. Terapi JIA diberikan selama kurang lebih sebelas minggu dengan pemberian farmakologis. Untuk beberapa kasus yang tidak umum, pengobatan JIA cenderung diperpanjang hingga beberapa bulan. Presentasi Kasus: Seorang pasien laki-laki berusia 5 tahun dengan keluhan utama nyeri kaki selama lebih dari 6 minggu dan tinggi badan lebih pendek dibandingkan dengan anak laki-laki lain seusianya, datang ke poliklinik alergi imunologi di rumah sakit umum tingkat tersier. Tidak ada riwayat demam maupun trauma. Diobati sebagai JIA oligoartikular, nyeri kaki membaik. Namun, nyeri baru muncul di area yang berbeda seperti sendi jari tangan. Hasil laboratorium pemeriksaan faktor reumatoid (RF) dan tes antibodi antinuklear (ANA IF) negatif. Hasil pGALS abnormal (pada parameter gaya berjalan dan kaki), anemia mikrositer hipokromik, stunting, malnutrisi akut sedang, dan ketidaksesuaian panjang kaki ditemukan. Perbedaan rentang panjang kedua tulang paha kurang dari 2 cm (dalam kasus ini $\pm 0,99$ cm) secara radiologis, sehingga tidak memenuhi kriteria apa pun untuk koreksi operasi. Uveitis terkait JIA tidak ditemukan. Perawatannya diperpanjang (sementara periode observasi penulis adalah 1 tahun) hingga sekitar 19 bulan sesi terapi. JIA poliartikular ditetapkan, dan ia menerima agen metabolit (metotreksat), dan beberapa episode injeksi intraartikular. Fisioterapi juga dilakukan dengan dukungan dari departemen rehabilitasi medis. Selama observasi, kemajuan yang lebih baik diperhatikan seperti penurunan intensitas dan kuantitas nyeri setiap hari, parameter pGALS yang lebih baik, dan kualitas tidur malam yang lebih baik. Ringkasan: Pasien ini mengalami perawatan JIA yang lebih lama daripada kebanyakan kasus. Faktor sosial ekonomi rendah dengan status ibu orang tua tunggal menjadi tantangan dalam meningkatkan kualitas hidup anak dan keluarga atau pengasuh. Mungkin diperlukan banyak faktor pendukung yang berperan dalam kasus yang mirip tersebut. Setelah total perawatan 19 bulan, tindak lanjut masih diperlukan untuk kemungkinan komplikasi.

Kata-kunci: juvenile idiopathic arthritis, anak, oligoartikular, poliartikular

JUVENILE IDIOPATHIC ARTHRITIS WITH SHORT STATURE

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ABSTRACT

Background: Juvenile idiopathic arthritis (JIA) in male patient is less often rather than in female patient. Therapy of JIA is given for approximately eleven weeks pharmacology administration. For several unusual cases, JIA treatment is tended to be prolonged until several months.

Case Presentation: A 5-year-old male patient with chief complaint of leg pain for more than 6 weeks and shorter body height compared to other boys with the same age, went to allergy immunology outpatient clinic in tertiary level general hospital. There were no history of fever nor trauma. Treated as an oligoarticular JIA, the leg pain got better. However, new onset of pain existed on different areas such as finger hand joints.

Laboratory results of rheumatoid factor (RF) and antinuclear antibody test (ANA IF) were negative. Abnormal pGALS result (at gait and legs parameter), microcytic hypochromic anemia, stunting, moderate acute malnutrition, and leg-length discrepancy were found. The difference between both of femurs' length range was less than 2 cm (in this case ± 0.99 cm) radiologically, thus it didn't meet any criteria for operation correction. JIA-related uveitis was not found. Its treatment was lengthened (while author's observation period was 1 year) until approximately 19 months therapeutic session. Polyarticular JIA was established, and he received metabolite agent (methotrexate), and some episodes of intraarticular injections. Physiotherapy was also done supported by medical rehabilitation department.

During observation, better progress was noticed such as decreased intensity and quantity of pain every day, better pGALS parameters and better quality of night sleep.

Summary: This patient experienced prolonged JIA treatment rather than most cases. Low socioeconomic factor with the single-parent mother status were challenging in improving both child and family or caregivers' quality of life. It may need many supporting factors that played role in such resemblant case. After total 19-month treatment, follow ups were still needed for possible complications.

Keywords: juvenile idiopathic arthritis, child, oligoarticular, polyarticular