Introduction

Most kinds of Juvenile Arthritis are autoimmune or autoinflammatory diseases. That means the immune system, which is supposed to fight against foreign invaders like viruses and germs, gets confused and releases inflammatory chemicals that attack healthy cells and tissue. In most Juvenile Arthritis cases this causes joint inflammation, swelling, pain and tenderness, but some types of Juvenile Arthritis have few or no joint symptoms or only affect the skin and internal organs.

Causes

The exact causes of Juvenile Arthritis are unknown, but researchers believe that certain genes may cause Juvenile Arthritis when activated by a virus, bacteria or other external factors. There is no evidence that foods, toxins, allergies or lack of vitamins cause the disease.

The most common types of Juvenile Arthritis include:

- Juvenile idiopathic arthritis
- Juvenile myositis
- Juvenile Lupus
- Juvenile scleroderma
- Vasculitis
- Fibromyalgia

Diagnosis

Juvenile Arthritis, like limited range of motion, rash, eye symptoms and joint swelling, tenderness and pain. Laboratory tests that look for inflammatory markers and imaging tests (X-rays, CT scans, MRIs) to look for signs of joint damage can also help rule out other causes like trauma or infection.

Treatment

There is no cure for Juvenile Arthritis, but with early diagnosis and aggressive treatment, remission (little or no disease activity or symptoms) is possible.

The goals of Juvenile Arthritis treatment are to:

- Slow down or stop inflammation and prevent disease progression.
- Relieve symptoms, control pain and improve quality of life.
- Prevent or avoid joint and organ damage.
- Preserve joint function and mobility for adulthood.
- Reduce long-term health effects.