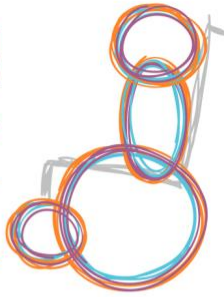


How does adherence to medication and exercise impact children with juvenile arthritis?

childhood
disability
LINK



Summary

The objective of this study was to determine the impact of adherence to treatment (medication and prescribed exercise) in children with juvenile idiopathic arthritis (JIA). This was a longitudinal study involving parents of 175 children with JIA at the Montreal Children's Hospital and British Columbia Children's Hospital in Vancouver. Adherence was evaluated on a visual analog scale in the Parent Adherence Report Questionnaire (PARQ). The impact of treatment adherence was evaluated with respect to active joint count (number of joints involved), pain, child functional score on the Child Health Assessment Questionnaire (CHAQ), quality of life score on the Juvenile Arthritis Quality of Life Questionnaire, and parental global impression of the child's overall well-being. Results demonstrated that moderate adherence to medication was associated with lower active joint count, while moderate adherence to exercise was associated with better functional score and lower pain. Both high and moderate adherence to exercise were also associated with parental perception of global improvement.

Practical Implications

It would be beneficial for clinicians to assess adherence to treatment regimens and use strategies to optimize adherence in order to maximize treatment benefits for patients with JIA.

Reference

[Ehrmann Feldman, D., De Civita, M., Dobkin, P.L., Malleson, P., Meshefedjian, G. & Duffy, C.M. \(2007\). Effects of adherence on shortterm outcome in juvenile idiopathic arthritis \(JIA\). Arthritis Rheum, 57, 887-90.](#)