

Juvenile Idiopathic Arthritis (JIA)



What is Juvenile Idiopathic Arthritis?

Juvenile idiopathic arthritis (JIA) is a chronic autoimmune disease that affects kids and teens under the age of 16. JIA is progressive¹ and, if left untreated, may severely affect a child's quality of life by inhibiting their ability to perform everyday tasks.²

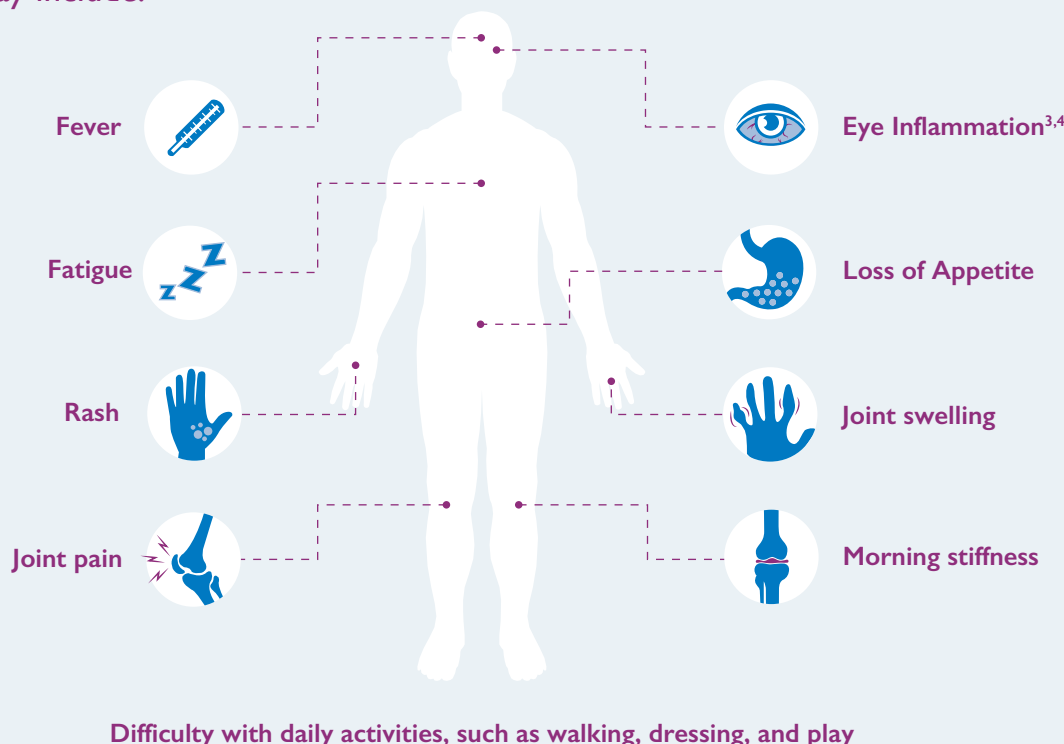
What causes JIA?

JIA is a disease of the immune system, which works to protect the body against threats like bacteria or viruses. But when the immune system is not working correctly – such as with JIA – it can mistakenly attack healthy cells and tissues.²



Common symptoms

JIA may be difficult to diagnose, because its symptoms are similar to other autoimmune diseases.³ JIA may involve one or more joints. Symptoms will last for at least 6 weeks and may include:³



Prevalence

JIA is the **most common** pediatric chronic rheumatic disease⁵

Affects nearly **300,000** children in the U.S. alone⁶

Affects girls **2-4x** more often than boys⁷



Treatment

Early diagnosis and regular visits with an experienced pediatric rheumatology team can help manage the complex needs of the child and family.³

There are treatment options available that may help with symptoms and prevent further joint damage, including:³

- Physical and occupational therapy³
- Non-steroidal anti-inflammatory drugs¹
- Steroid injections into joints³

For moderate-to-severe cases of JIA, patients may respond to:

- Oral steroids
- Disease-modifying anti-rheumatic drugs (DMARDs), anti-inflammatory medicines⁸
- Biologic disease-modifying anti-rheumatic drugs (bDMARDs) which are believed to interrupt the effects of substances made naturally by the immune system and improve physical function²



JIA strikes at a time when kids want to be kids.

Managing the physical effects of JIA is important, but finding time for regular doctor's visits can be a struggle for some families. Talk to your doctor about treatment options that are available at home.

Bristol Myers-Squibb is committed to identifying and pursuing new treatment options and innovative development approaches to help deliver transformational medicines for patients with juvenile idiopathic arthritis and other immune-mediated diseases.



1. Shepherd J, Cooper K, Harris P, Picot J, Rose M. The clinical effectiveness and cost-effectiveness of abatacept, adalimumab, etanercept and tocilizumab for treating juvenile idiopathic arthritis: a systematic review and economic evaluation. Health Technol Assess 2016;20(34). 2. Orenzia Moderate to Severe Juvenile Idiopathic Arthritis (JIA) Patient Brochure. Last Updated: August 2018. Princeton, NJ: Bristol-Myers Squibb Company. 3. American College of Rheumatology. Juvenile Arthritis. <https://www.rheumatology.org/In-Am-A/Patient-Caregiver/Diseases-Conditions/Juvenile-Arthritis>. Accessed May 17, 2019. 4. Centers for Disease Control and Prevention (CDC). Arthritis Types: Childhood Arthritis. <https://www.cdc.gov/arthritis/basics/childhood.htm>. Accessed May 17, 2019. 5. Poster: "Long Term Effectiveness and Safety..." Prakken B, et al. Lancet 2011;377:2138-49. 6. Arthritis National Research Foundation. Juvenile Arthritis Research: Causes of JIA. <https://curearthritis.org/juvenile-arthritis-research/>. Accessed May 17, 2019. 7. Verbsky J, Oberle E, Harris J. Polyarticular juvenile idiopathic arthritis – epidemiology and management approaches. Clinical Epidemiology. 2014;379. 8. Arthritis Foundation (AF). Juvenile Idiopathic Arthritis Treatment. <https://www.arthritis.org/about-arthritis/types/juvenile-idiopathic-arthritis-jia/treatment.php>. Accessed May 17, 2019.