Conclusion: Manifestations of sarcoidosis vary significantly across the paediatric age spectrum. While EOS is a known juvenile idiopathic arthritis mimick, nephritis and GIT inflammation may lead to a non-rheumatologic diagnosis. Apart from specific infections other childhood diseases may also present with granuloma formation. Crohn’s disease, chronic granulomatous disease (and other primary immunodeficiencies), granulomatosis with polyangiitis. Our small series reflects disease heterogeneity and diagnostic difficulties that prolonged the diagnosis by years in 4/7 patients.

REFERENCES

Disclosure of Interests: None declared

AB0966
PROPOSAL OF OUTCOME MEASURES TO BE USED ON A 12-MONTH OPEN LABEL DRUG TRIAL IN JUVENILE SYSTEMIC SCLERODERMA, RESULTS OF THE 3RD CONSENSUS MEETING IN HAMBURG DECEMBER 2018
Ivan Foeldvari1, Kathryn Torok2, Lusine Ambartsumyan2, Jordi Anton2, Christian Beyer2, Michael Blakley2, Tamas Constant2, Patricia Costa Reis2, Megan Curran2, Maurizio Cutolo2, Francesco De Galdio2, Christopher Denton2, Clarissa Pilkington2, Vanessa Smith2, Anne Stevens2, Brandi Stevens2, Allison Zheng2, Dinesh Khanna2, Daniel Furst2.

Objective: The aim of our third consensus meeting was to establish the domains and the items that should be assessed in a clinical drug trial in JSSc.

Methods: In the consensus meeting 26 JSSC international experts with various specialties participated (22 voted). In a nominal group technique, various specialties participated (22 voted). In a nominal group technique, consensus was defined if 80% or more of the participants approved an item.

Results: Domains and items suggested in the 2017 consensus meeting were reconsidered and selected or rejected during the 2018 meeting, as were additional domains/items (Table). Conclusion: We reached consensus on domains and items which should be assessed in an open label 1 year clinical JSSc trial. We also listed research items which should be assessed but should not currently be included as an outcome in such a trial.

Disclosure of Interests: Ivan Foeldvari Consultant for: Chugai, Novartis, Kathryn Torok: None declared, Lusine Ambartsumyan: None declared, Jordi Anton: Grant/research support from: Grant/research support, consultant or speakers bureau from AbbVie, Alexion, Bristol-Myers Squibb, Chemocentury, Gebro, GlaxoSmithKline, Novartis, Novimmune, Pfizer, Roche, Sanofi and Sobi, Consultant for: Grant/research support, consultant or speakers bureau from AbbVie, Alexion, Bristol-Myers Squibb, Chemocentury, Gebro, GlaxoSmithKline, Novartis, Novimmune, Pfizer, Roche, Sanofi and Sobi, Speakers bureau: Grant/research support, consultant or speakers bureau from AbbVie, Alexion, Bristol-Myers Squibb, Chemocentury, Gebro, GlaxoSmithKline, Novartis, Novimmune, Pfizer, Roche, Sanofi and Sobi, Christopher Beyer: None declared, Michael Blakley: None declared, Tamas Constant: None declared, Patricia Costa Reis: None declared, Megan Curran: None declared, Maurizio Cutolo: None declared, Francesco De Galdio: None declared, Christopher Denton: Grant/research support from: GlaxoSmithKline, Inventiva, CSF Behring, Consultant for: Roche, Genentech, Actelion, GlaxoSmithKline, Sanofi Aventis, Inventiva, CSL Behring, Boehringer Ingelheim, Bayer, Kim Filigleston: None declared, Bernd Hinrichs: None declared, Antonia Höger: None declared, Francesca Ingegnoli: None declared, Ozgur Kasapcopur: None declared, Suzanne Li: None declared, Dana Nemcovoa: None declared, Catherine Orteu: None declared, Clarissa Pilkington: None declared, Vanessa Smith: None declared, Anne Stevens: None declared, Brandi Stevens: None declared, Dinesh Khanna: Shareholder of: Eicos Sciences, Inc, Grant/research support from: Bayer, BMS, Pfizer, Horizon, Consultant for: Actelion Acceleron, Arena, Bayer, BI, BMS, CSL Behring, Corbus, Cytori, GSK, Genentech/Roche, Galapagos, Employee of: Eicos Sciences, Inc, Daniel Furst: Grant/research support from: F. Hoffmann-La Roche, Genentech

AB0967
IS THERE A DIFFERENCE IN PRESENTATION OF FEMALE AND MALE PATIENTS WITH JUVENILE SYSTEMIC SCLERODERMA. AN UPDATE FROM THE JUVENILE SYSTEMIC SCLERODERMA INCEPTION COHORT. WWW.JUVENILE-SCLERODERMA.COM
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Background: Juvenile systemic sclerosis (JSSc) is an orphan disease, associated with high morbidity and mortality. New treatment strategies are much needed. To develop an open label drug trial for the treatment of JSSc patients, it is necessary to clearly define how to evaluate outcomes in this disease, which are currently not existing. A group of experts in JSSC has met annually and worked to develop an index to evaluate outcomes in this disease.

Objectives: The aim of our third consensus meeting was to establish the domains and the items that should be assessed in a clinical drug trial in JSSc.

Methods: In the consensus meeting 26 JSSC international experts with various specialties participated (22 voted). In a nominal group technique, moderated by DEF, was used to develop the outcome measures. Agreement was defined if 80% or more of the participants approved an item.

Results: Domains and items suggested in the 2017 consensus meeting were reconsidered and selected or rejected during the 2018 meeting, as were additional domains/items (Table). Conclusion: We reached consensus on domains and items which should be assessed in an open label 1 year clinical JSSc trial. We also listed research items which should be assessed but should not currently be included as an outcome in such a trial.

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