MRI AND ULTRASOUND (US) ASSESSMENT OF TMJs involvement in young adults with juvenile idiopathic arthritis (JIA) and non-JIA chronic inflammatory arthropathies

Adriano Lercara1, Gloria Crepaldi2, Marco Davico2, Stefano Cirillo2, Sarah Marouen3, Enrica Vandelli3, Yves-Marie Pers3, Claudia Lomater1.

Background: TMJ involvement in adult patients with JIA is associated with greater disease activity and disability than in non-JIA chronic inflammatory arthropathies (CIA) and co-occurs with enthesal lesions in the hand. However, the frequency of TMJ involvement in JIA and non-JIA chronic inflammatory arthropathies has not been reported before.

Objectives: To determine the frequency of TMJ inflammation and damage in adult patients with JIA compared to non-JIA chronic inflammatory arthropathies.

Methods: Patients with JIA and non-JIA chronic inflammatory arthropathies were recruited from the Rheumatology Unit of Ospedale Mauriziano Umberto I, Turin, Italy. JIA patients were classified as under-18 years of age with a diagnosis of JIA (according to OMERACT definitions) and non-JIA chronic inflammatory arthropathies were classified as adults with inflammatory rheumatisms who fulfilled the classification criteria for each disease. Ultrasound and MRI examinations were performed in all patients.

Results: The frequency of TMJ inflammation and damage in adult patients with JIA was significantly higher than in non-JIA chronic inflammatory arthropathies (p<0.05). The frequency of TMJ inflammation and damage was also higher in JIA patients than in non-JIA chronic inflammatory arthropathies with a history of inpatient treatment (p<0.05).

Conclusion: TMJ involvement is a common feature in adult patients with JIA and is associated with a higher disease activity and disability than in non-JIA chronic inflammatory arthropathies.

REFERENCE: