

Poster presentation

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## Comparison of the accuracy of different definitions of clinical remission (CR) and minimal disease activity (MDA) in juvenile idiopathic arthritis (JIA)

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### Background

Since the introduction of biologic agents, expectations of medical treatment for chronic arthritides have increased markedly. It is now agreed upon that estimation of effectiveness of these drugs requires not only the assessment of relative improvement in signs and symptoms, but the evaluation of their ability to induce a state of CR or, at least, MDA. In recent years, several criteria for assessing CR and MDA in adult rheumatoid arthritis (RA) or JIA have been developed.

### Objective

To apply existing definitions of CR or MDA in a large sample of visits made in JIA patients.

### Methods

851 visits made in 446 patients between 1992 and 2006 were assessed. CR was defined as achieving: 1) DAS28 score <2.4; 2) SDAI score  $\leq$  3.3; 3) CDAI score  $\leq$  2.8; 4) Clinical remission criteria for RA; 5) preliminary definition of CR for JIA. LDA was defined as achieving: 1) DAS28 score <3.6; 2) SDAI score  $\leq$  11; 3) CDAI score  $\leq$  10; 3) LDA criteria for RA; 4) LDA criteria for JIA.

### Results

Table 1: shows the percentage of patients classified in state of CR or MDA by each criterion.

### Conclusion

Definition of CR in JIA proved more restrictive than correspondent definitions for adult RA. The proportion of patients classified in MDA by JIA criteria and DAS28, CDAI and SDAI criteria was similar, whereas RA criteria for LDA led to classify relatively more patients in such state.

**Table 1: The percentage of patients classified in state of CR or MDA by each criterion**

	DAS28	SDAI	CDAI	RA criteria	JIA criteria
CR	19.3	19.2	18.7	13.0	10.8
MDA	25.7	23.4	22.7	38.3	21.9