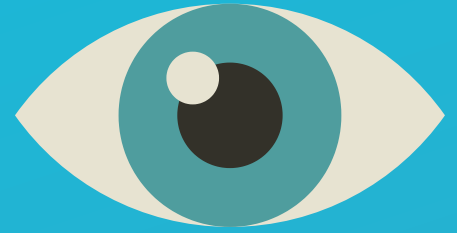


# Canadian Rheumatology Association Recommendations for the Screening, Monitoring and Treatment of Juvenile Idiopathic Arthritis-Associated Uveitis

Endorsed by the Canadian Ophthalmological Society and  
Cassie and Friends

Recommendations for Juvenile Idiopathic Arthritis (JIA)-associated uveitis were adapted to the Canadian context by a working group of pediatric rheumatologists, ophthalmologists and parent/patient input, taking into consideration cost, equity, and access.



## Ophthalmic Screening



- At least every 3 months in high risk patients (age<7, female, oligoarticular, ANA+).

## Monitoring



- Every 1-3 months following any change (addition, increase, taper or discontinuation) of topical glucocorticoid (GC) or systemic therapy.

## Topical Glucocorticoids



- Prednisolone Acetate 1% topical drops (recommended).
- Add or increase topical GC for short-term control and before add/increase/change in systemic therapy.
- If >2 drops required for >3 months, add/increase/change systemic therapy.

## Systemic Therapy



- Methotrexate is first-line systemic therapy.
- Monoclonal tumor necrosis factor inhibitor (TNFi) recommended over other biologics.
- Switch to tocilizumab or abatacept if failure to adequately respond to optimal dosing of two different TNFi.

## Taper Therapy for Uveitis



- If inactive uveitis:
  - Stop any drops first.
  - Taper/stop systemic therapy after 2+ years without drops.

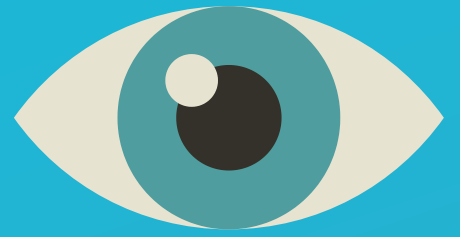
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Patients with Juvenile Idiopathic Arthritis (JIA) can develop uveitis. Here are the Canadian recommendations for screening and treatment of JIA associated uveitis:



## Screening



- See your eye doctor within 1-2 months of JIA diagnosis.
- See your eye doctor as directed by your rheumatologist.
- This may be as often as every 3 months (age<7, female, oligoarticular, ANA+).

## Monitoring



- You will need to see your eye doctor every 1-3 months following any eye medication change.

## Eye Steroid Drops



- Your eye steroid drops may change frequently.
- If >2 drops are required for >3 months, your eye doctor will discuss with you additional medications or a change in your systemic therapy.

## Education



- Try to attend eye care visits at the frequency your health care team has recommended.
- Do not delay treatment.
- Talk to your rheumatologist and eye doctor to learn the signs of uveitis for your type of JIA.

## Decreasing/ Stopping Medications for Uveitis



- If no eye inflammation your eye doctor will consider:
  - Stopping steroid eye drops first.
  - Decreasing other systemic medications after 2+ years without steroid eye drops.