

Summary & Conclusions

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Juvenile rheumatoid arthritis (JRA) is a relatively common chronic illness in children. JCA is the result of complex processes which are developed on the genetic background and started by triggering event, leading to the clinical picture of JCA.

Immune system stands in the center of all the processes involved in the genesis of JCA. Several studies on the prevalence of other autoantibodies in JRA have been performed.

In the current study, we aimed to evaluate the prevalence of ANCA in patients with JRA and to determine its clinical, laboratory and radiological implications.

For that purpose, we studied 30 patients with JRA in addition to 20 healthy children. The studied cases involves 12 (40.0 %) males and 18 (60.0 %) females with mean age of 10.88 ± 1.55 years (range 8.5 - 14.0).

Regarding the immunological profile in the studied cases, we reported the presence of +ve ANA in 19 cases (63.3 %). We recorded ANCA +ve cases in 13 cases accounting for 43.3 % of the studied group.

Regarding comparison of the demographic characteristics in the studied groups, it has been shown that ANCA +ve cases have significantly higher frequency of males, while both groups have statistically similar ages; this findings doesn't seem to have clinical significance and may be attributed to sample selection bias.

Regarding comparison of the other clinical and laboratory findings shows that ANCA +ve cases have significantly higher frequency of polyarticular onset than ANCA -ve cases, while no significant differences were detected regarding functional capacity activity, uveitis and disease duration. In addition, Comparison of disease activity between ANCA +ve and ANCA -ve cases had showed no significant differences. Further, Comparison of laboratory variables in the studied groups showed no significant differences between both groups regarding ESR, Hb, Platelet count, WBCs. Finally, there was no association between disease activity and ANCA titer ($r=-0.192$, $p=0.53$)

In conclusions, ANCA didn't prove to show clear association with JRA pathogenesis, clinical manifestations and immunological and laboratory profile in spite of the fact that it remains a challenging issue necessitating further research and illumination.