Pediatric Rheumatology

Poster presentation

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Reduction in missed school days and improvement in parent activity participation in children with juvenile idiopathic arthritis treated with abatacept

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from 15th Paediatric Rheumatology European Society (PreS) Congress London, UK. 14–17 September 2008

Published: 15 September 2008 Pediatric Rheumatology 2008, 6(Suppl 1):P86 doi:10.1186/1546-0096-6-S1-P86

This abstract is available from: http://www.ped-rheum.com/content/6/S1/P86

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Background and purpose

Chronic pain and physical disability from juvenile idiopathic arthritis (JIA) limits patients' capacity to participate in usual daily activities, and often cause children to miss school and parents to miss work. The purpose of this study was to investigate the change in activity participation in both children with JIA and their parents, following abatacept treatment.

Methods

190 JIA patients were treated with abatacept for 4 months in an open-label lead-in period (Period A). ACR Pedi 30 responders (n = 123) were then randomized 1:1 to receive abatacept or placebo for 6 months in a double-blind withdrawal period (Period B). Activity participation for the child and the parents were assessed, along with clinical and quality of life (QOL) parameters. Mean change from baseline in each period was analyzed, and the two treatment groups were compared.

Results

During Period A, there was a gradual reduction of missed activity days for both children and parents. In Period B, children randomized to continue abatacept reduced another 1.5 days/month of missed school, compared to an increase of 0.56 days/month from placebo. Parents of abatacept patients maintained their gain in usual activity from Period A, while parents of placebo patients had 1.1 days/month of missed activities. The improvements in activity were consistent with clinical responses and QOL improvements observed.

Conclusion

Abatacept treatment improved patient's ability to participate in daily activities and parents get back to usual daily activities. This demonstrates real-life tangible benefits to JIA patients as a result of clinical and QOL improvements.