Pediatric Rheumatology



Poster presentation

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Sleep, fatigue and quality of life in juvenile idiopathic arthritis (JIA) and Juvenile Dermatomyositis (JDM)

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Objective

To determine the prevalence of abnormal sleep in JIA and JDM and its relationship to pain, dysfunction, disease activity and medications.

Materials and methods

155 patients (115 – JIA, 40 – JDM) were randomly sampled and were mailed questionnaires. Sleep was assessed by Sleep Self – Report (SSR) and Children's Sleep Habits Questionnaires (CSHQ). Fatigue, pain and function was assessed by PedsQL. Disease activity was assessed by VAS Joint counts were self reported.

Results

81% responded. 44% reported abnormal sleep (CSHQ > 41); there were no differences between disease groups.

Sleep self report was highly correlated with PedsQL fatigue ($R^2 = 0.31$, p < 0.0001).

Fatigue was highly correlated with quality of life ($R^2 = 0.6$, p < 0.0001).

The worse pain intensity in the last week was correlated to sleep disturbance ($R^2 = 0.1$, p = 0.0005).

Fatigue was related to prednisone and methotrexate use as reported by patients and parents.

Conclusion

Sleep disturbance and fatigue are prevalent among children with different rheumatic diseases. Sleep disturbance and fatigue are strongly related to increases in pain and decreases in quality of life. Strategies aimed at improving sleep should be studied as possible ways of improving quality of life for children with rheumatic illness.