

CASE REPORT OLIGOARTHRITIS

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- Identification and Initial Complaint:
 - G.O.,♂, 4yo
 - Main complaint: painful and swallowed joints, lasting approximately 6 weeks
 - Initial Clinical Features:
 - diffuse pain in both legs, first attributed to extensive bike riding
 - fever of 38°C
 - edema in the right ankle >>>> claudication
 - edema and pain in the left elbow
 - The pain worsened daily despite the use of common analgesia and anti-inflammatory drugs!



Initial Laboratory Findings:

- Mucoprotein 7.9mg/dL
- Hb 12.7 g/dL, Ht 39.9%, WBC 11.2 (n 49% bf 7% I 26% m 14% e 2%), Platelet 459.000
- ESR 52 mm
- CRP 12 mg/dL
- ASLO < 200UI
- -RF < 8mUI/mI
- ANA negative



- Initial Imaging Studies:
 - Left Elbow and Right Ankle Radiography: no abnormalities
 - Ultrasounds of the Ankle and Elbow: no abnormalities
 - Electrocardiogram and Echocardiogram: normal according to age



- First Diagnostic Impression: Oligo JIA by an adult rheumatologist
- Treatment: prednisolone and ASA
 - Transient 5-day relief of complaints
 - Recurrence of the pain, night awakenings painrelated



 After 45 days, referred to a pediatric rheumatologist

Additional Symptoms Presented:

- fever in a weekly pattern
- moderate fatigue
- weight loss >>> 2 kilograms



At Physical Examination:

- Arthritis of left elbow and right ankle
 - severe pain
 - amplitude restriction of movement
 - · minimum edema
- Cervical and occipital lymphadenopathy
 - mobile, elastic, = 1 cm
- No signs of consumption





Further Laboratory Studies:

- Hb 12.4 g/dL, Ht 38.6, WBC 17.9, (n 52% bf 3% I 39% m 7% e 2%), Platelet 768.000
- ERS 4mm
- CRP 15,61 mg/dL
- LDH 172 U/L
- UA 3,7mg/dL
- 25-OH Vit D 34.1ng/mL
- Ferritin 19.6ng/m
- AP 161U/L



- Further Imaging Studies:
- Cervical US: bilateral lymphadenomegaly
 - Bigger diameter lymph node, right cervical chain >>> 1,0 x 0,5 centimetres
- Abdominal US: normal
- Skeleton X-Ray: normal
- Bone Scintigraphy: hypercapitation on the left elbow and right ankle





- Additional Investigation:
- Bone Marrow Aspirate:
 - Intact and stimulated erythro-, granulo-, and thrombopoiesis.
- Biopsies: Cervical Lymph Node, Synovial Membrane (Right Ankle)
 - atypical lymphoproliferative process
 - Immunohistochemical acute lymphoblastic leukemia



- Additional Investigation:
- Extension of the immunohistochemical panel >>> inconclusive
- A new bone marrow biopsy was conducted within 20 days
 - Patient remained without steroids during the period!
- Positive for ALL (> 59% lymphoblast of the total cell count)



- Treatment and Follow-Up:
- Classification: Previous use of corticosteroids: highrisk group (GBTLI 2009 protocol)
- Treatment: Intrathecal Methotrexate and Vincristine
- Presente Day: late maintenance phase of treatment, very positive response to chemotherapy



- Oligoarthritis
- Important pain and restriction of movement
- Night awakenings
- Little edema
- Constitutional symptoms
- No response to anti-inflammatory drugs
 - >>>> MALIGNANT ARTHRITIS <<<<<



Thank You!

"Not all of us can do great things, but we can do small things with great love."

(Mother Teresa of Calcuta)