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|  | **What is it?** | **What are the symptoms?** | **What is the outlook?** | **What else should I know?** |
| **Oligoarthritis** | The most common type – affects about two thirds of young people with arthritis. It's often mild. | Most commonly affects one or both knees.  Most likely type to cause eye inflammation (chronic anterior uveitis) – you'll need regular eye checks. | Most likely type to go away leaving little or no joint damage. | If you develop problems with five or more joints after six months, this is called extended oligoarthritis. This can cause joint damage. Your doctor may suggest early treatment with drugs like methotrexate to keep the damage to a minimum. |
| **Polyarthritis** | The second most common type of JIA.  It may come on suddenly or can steadlily involve more joints over a period of months. | Painful swelling in fingers, toes, wrists, ankles, hips, knees, the neck and jaw  You may feel unwell and tired and occasionally develop a slight fever. | Symptoms may continue into adult life, but it can go into remission, where all the symptoms disappear. | A blood test will show whether a marker called rheumatoid factor is present in your blood. |
| **Enthesitis-related JIA** | Affects the places where the tendons attach to the bone (entheses), causing inflammation. | Often affects the joints of the leg and spine.  Associated with a red painful eye condition (acute uveitis). | You may develop stiffness in your neck and lower back in your teens. | There may be a family history of ankylosing spondylitis or inflammatory bowel disease because of a particular genetic marker called HLA-B27. |
| **Psoriatic arthritis** | Psoriasis is a skin rash. A combination of joint pain and the rash is known as psoriatic arthritis. | Usually affects fingers and toes but may affect other joints too.  Joints may be affected before the psoriasis appears – your doctor may look closely at fingernails and toenails for early signs.  Uveitis is fairly common but it's the painless type that doesn't look red. | It’s difficult to predict, but between 30-40% have ongoing disease into adulthood. | Your doctor may ask if anyone else in your family has the condition. |
| **Systemic-onset JIA** | Joint pain is part of a general illness involving a fever, tiredness, a rash, loss of weight and appetite. | Enlarged glands in your neck, under your arms and around your groin.  Your doctor may find your spleen and liver are enlarged, and, very occassionally, the covering of your heart is inflamed (pericarditis).  In the first few weeks there may be no sign of swollen joints, and the diagnosis may be uncertain. | Outlook can be difficult to predict but usually the fever and rash will settle, although the arthritis may continue for several years before settling. | Lots of tests may be needed to confirm the diagnosis and this can be a worrying time. |