



Grandparents Corner

July 2017

National Juvenile Arthritis Month

That's right, kids get arthritis. It is a common misconception that only "older" people suffer with arthritis. An estimated 300,000 children and their families face the everyday challenges of living with Juvenile Arthritis (JA) and related diseases.

The various types of Juvenile Arthritis share many symptoms like pain, joint swelling, redness and warmth, but each type of JA is distinct and has its own unique characteristics and how it affects the body.

Juvenile Idiopathic Arthritis (JIA) is considered the most common form of arthritis.

A team approach is the best way to treat Juvenile Arthritis. Physicians trained to treat these types of diseases in children are the best managers for the care (pediatric rheumatologist). Other members of the team may include:

- Physical Therapist
- Occupational Therapist
- Counselor or Psychologist
- Eye Doctor
- Dentist and Orthodontist
- Bone Surgeon
- Dietitian
- Pharmacist
- Social Worker
- Rheumatology Nurse
- School Nurse

What are some symptoms and signs of Juvenile Arthritis?

- Limping in the morning because of a stiff knee.
- Excessive clumsiness.
- High fever and skin rash.
- Joint swelling, pain and stiffness that doesn't go away.
- Swelling in lymph nodes in the neck and other parts of the body

For more information about Juvenile Arthritis contact:

National Institute of Arthritis and Musculoskeletal and Skin Disease - www.nih.gov

Arthritis foundation - www.arthritis.org

An emergency supply kit should contain everything you and the person in your care will need for three days. Make two kits. In one kit, place everything you will need to stay where you are. The other kit should be a lightweight, smaller version you can take with you. Read the issue and answer True or False to the questions below.

1. Air conditioning is one of the best protections against heat-related illness and death. T F

2. Heat stroke is not a serious heat-related illness. T F

3. If you suspect a person is having a problem with the heat, err on the side of caution and insist they get into shade and cool down. T F

4. Extremely high body temperature (above 103°F), red, hot, dry skin, rapid pulse and a throbbing headache are signs of a life-threatening emergency. T F

5. When there are signs of a heat stroke, monitor body temperature; continue cooling efforts until body temperature drops to 101–102°F. T F

6. Recovering from an emergency or a natural disaster tomorrow often depends on the planning and preparation done today. T F

7. Emergency personnel will often check “ICE” (In Case of Emergency) listings in a phone to reach a friend or family member. T F

8. During a storm emergency, be ready with a cooler chest to store medications that require refrigeration. T F

9. Heat exhaustion, if left untreated, leads to heat stroke. T F

10. If the person in your care is in a wheelchair or has mobility problems, it is important to plan for how they will evacuate. T F

KEY: 1. T 2. F 3. T 4. T 5. T 6. T 7. T 8. T 9. T 10. T