- Typical symptoms (high, spiking fever, rash, myalgia, joint pain) may not all be present at the same time or common in all patients.
- Organ involvement is possible in early disease.
- Rashes and fever may disappear quickly.
- Affects both children and adults. Adults originally diagnosed with SJIA do not have AOSD.
- Can mimic an infection.

More information about Still's Disease can be found at www.aiarthritis.org/stillsdisease

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#MyStills

STILLS DISEASE

Rare autoinflammatory disease continuum that includes both Systemic Juvenile Idiopathic Arthritis (SJIA) and Adult-Onset Still's Disease (AOSD).

#MyStills
• Daily, spiking fevers can normalize quickly or last a week +.
• Rash—flat or raised, typically does not itch, but it may.
• Organs most often involved: spleen, liver, lungs, heart, lymph nodes/glands.
• Sore throat, myalgia, fatigue common.
• Arthritis may not be present at onset or for several years. Some experience severe joint pain & swelling.

Common laboratory abnormalities:
Elevated erythrocyte sedimentation rate (ESR),
elevated leukocytes, especially neutrophils (white blood cells),
thermocytosis (high platelet count),
elevated ferritin levels (sometimes dramatically),
negative rheumatoid factor (RF) test, negative antinuclear antibodies (ANA) test, anemia (<10 g/dl),
hypoalbuminemia (low albumin levels < 3 g/dl), mild elevated liver enzymes.
Screen for Macrophage activation syndrome (MAS).

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