

Systematic Review of Measurement Instruments for Patients with Juvenile

Idiopathic Arthritis in the Foot and Ankle

Gabriel Gijon-Nogueron* PhD. Ana Belen Ortega-Avila* PhD, Laura Ramos-Petersen** MsC and Pablo Cervera-Garvi* PhD *Department Nursing and Podiatry. University of Malaga Spain ** University Catholic of Murcia. Spain







Instituto de Investigación Biomédica de Málaga





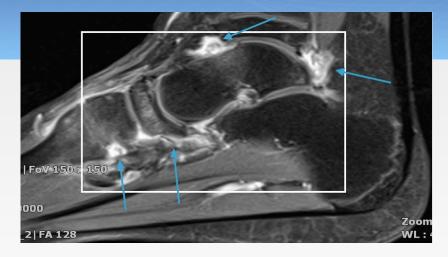
Juvenile idiopathic arthritis(JIA)

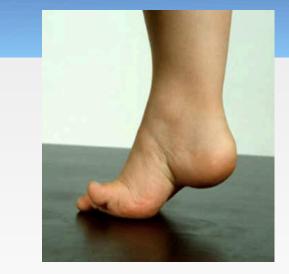
- Juvenile idiopathic arthritis(JIA) is the most common rheumatic disease in childhood.
- The part of the body most commonly affected, and where cysts are most likely to form, is in the small joints of the foot











 The most common abnormal alignments are valgus foot, cavovarus foot and varus heel position ¹. Children with JIA may also present with enthesitis in the plantar fascia or Achilles tendon, flexion contractures, synovitis or muscle atrophy ²

1. Truckenbrodt H, Hafner R, Von Altenbockum C. Functional joint analysis of the foot in juvenile chronic arthritis. In: Clinical and Experimental Rheumatology. 1994.

2. Ravelli A, Martini A. Remission in juvenile idiopathic arthritis. Clin Exp Rheumatol. 2006;



Patient-reported outcome measures (PROMs)

Appendix L. Avenile Arthritis Multidimensional Assessment Report (FAMAR): Parent's version.

Patient's name and survame (or initials),		 Dein_
Parent filling in the quantizenalmy	intering a	- Father Cl

The stor of this questionnate is to gather information on the current state of your child's them. Your anceest will help as improve our christel evolution. Piece read the questions below carefully and shoose the preservation for a paper of the your child. If you have doubte or need any challballion, please and her our helps. There are no right as second answers. We simply ask that you arouse muscify as you hed.

1. Doctumber of functional ability

Pinace choose the analysis that least describes your child's ability to sarry out the activities listed before with particular reference in the part from wents. Please indicate only the difficulties or limitations passed by the lings. If your shild has difficulty carrying out any of these activities because he/she is too young and get. because of the illness indicate "Net applicable".

	with rule altitude	with Source all Taulty	diffeeity	to de	Not applicable
3. Run an Ratigneural for al least 32 meters	0	D	12	0	0
2. Work up 3 simple		D	12	12	0
3. Jump Foreard		D	10	13	12
d. Sepuel			10	13	12
3. Rend shown to pick up an object off the Base			13		- 12
 Carry sui activities that require the use of his/her fragers 	0	D		0	0
3. Open and down his/her lists			13	11	- 12
8. Squeeze as object with his/her hands.			13		1
8. Open a door by lowering the handle		10			12
 Open and door a tag or open a previously opened (a) 	D	D		0	a
11. Stretch out higher area.		13			0
33. Put his/her hants behird his/her neck		D	0		0
 Turn higher head and look over higher shoulders 	D	D	Ω	0	a
34. Bend hig/her head back and look at the colling	D	D			
25. Bits: into a sambwich or an apple	D	D	0	- 0	a

2. How much gain has your child had because of the Illiness over the gast week? choose the most securate acare)

60









Objetives

- 1) To identify specific PROMs for children and adolescents with JIA in the foot and ankle;
- 2) To assess the methodological quality and psychometric properties of these instruments

Search strategy

n

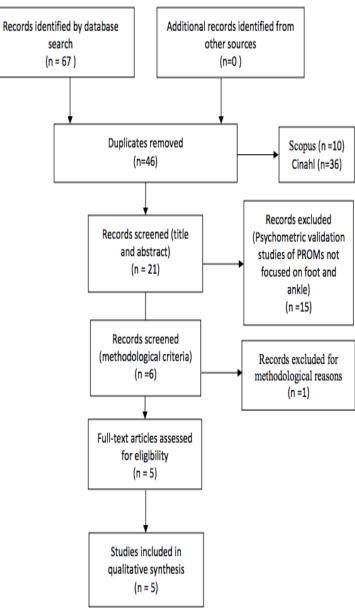
- PubMed, Scopus, CINAHL, PEDro and Google Scholar
- Juvenile idiopathic arthritis, patient-reported outcomes, foot, feet, ankle

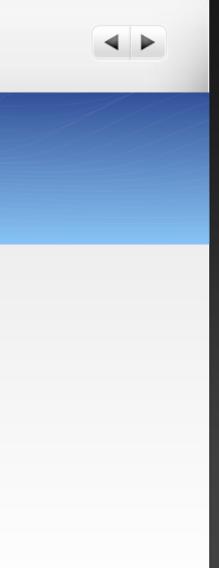
<u>Quality appraisal</u>

COSMIN checklist was used to evaluate the methodological quality of the studies undertaken to investigate the measurement properties of one or more PROMs

Terwee CB, Lidwine @bullet, Mokkink B, Knol DL, Ostelo RWJG, Bouter LM, et al. Rating the methodological quality in systematic reviews of studies on measurement properties: a scoring system for the COSMIN checklist. Qual Life Res [Internet]. 2012 [cited 2018 Apr 4];21:651–7.







Acronym	Full title	Author	Country	Year of Publication
JAFI	Juvenile Arthritis Foot Disability Index	Marie André et al	Sweden	2014
OAFQ	Oxford ankle foot questionnaire	C. Morris et al	UK	2008
OAFQ Danish	Oxford ankle foot questionnaire in Danish	P. Martinkevich et al	Denmark	2015
OAFQ Italian	Oxford ankle foot questionnaire in Italian	Nicolò Martinelli et al	Italy	2016
OAFQ Dutch	Oxford ankle foot questionnaire in Dutch	Elise Burguer	Netherland	2017

Characteristic of included studies

	d	h		
1	ľ	l	Ì	

	Content validity	Internal consistency	Criterion validity	Construct validity	Reproducibility Agreement	Reproducibility Reliability	Responsiveness	Floor and ceiling effects	Interpretability
JAFI	+	0	?	?	0	-	?	+	?
OAFQ	+	?	-	-	?	?	?	0	?
OAFQ Danish	+	-	-	?	-	-	-	-	?
OAFQ Italian	+	+	-	?	?	+	?	-	?
OAFQ Dutch	+	-	-	?	-	-	+	0	?

Rating: + Positive; ? Indeterminate; - Negative; 0 No information available.

Assessment of the measurement properties of the questionnaires

	Structural validity	Internal consistency	Reliability	Measureme nt error	Hypotheses testing for construct validity	Cross- cultural validity	Criterion validity	Responsiveness
JAFI	-	?	-	?	+	+	?	+
OAFQ	?	?	?	?	-	?	-	-
OAFQ Danish	-	-	-	?	+	+	-	+
OAFQ Italian	-	+	+	?	+	-	-	+
OAFQ Dutch	-	-	-	?	+	+	-	+





Discusion







Conclusion

 Within the generally low methodological quality of the studies examined in this review, the Italian-language version of the Oxford Ankle Foot Questionnaire for children provides acceptable psychometric properties and methodological quality, according to the COSMIN criteria.