

PREVALENCE OF DEPRESSIVE SYMPTOMS IN PATIENTS WITH JUVENILE IDIOPATHIC ARTHRITIS: CLINICAL IMPACT BEYOND JOINT MANIFESTATIONS

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RESUMO

Juvenile Idiopathic Arthritis (JIA) is the most common chronic rheumatic disease in childhood, characterized by persistent joint inflammation with onset before 16 years of age. In addition to physical manifestations, chronic pain, functional limitations, and psychosocial factors contribute to inflammatory changes and impact emotional well-being. Evidence indicates that JIA may compromise psychosocial development and increase vulnerability to depressive symptoms during critical growth phases. However, gaps remain regarding the prevalence of these symptoms and associated factors in this population. To assess the prevalence of depressive symptoms in patients with Juvenile Idiopathic Arthritis. This is a narrative literature review, with a structured search conducted in the PubMed database. English descriptors combined with Boolean operators were used, including “Juvenile Idiopathic Arthritis,” “Depression,” “Depressive Disorder,” and “Prevalence.” Studies published between 2019 and 2026, in English, were included. Initially, 35 articles were identified, and after selection by reading titles, abstracts, and full texts, 10 studies that assessed the prevalence of depressive symptoms in patients with juvenile idiopathic arthritis, with or without comparison to healthy individuals, were included. Data organization was guided by an adaptation of the PECO strategy. The prevalence of depressive symptoms in JIA patients ranged from 10% to 33%, depending on the assessment instrument and sample characteristics. Comparative studies showed heterogeneous results, with some indicating a higher risk of depression in JIA patients, while others found no significant difference compared to healthy controls. Relevant rates of suicidal ideation (6%-12.2%) were also identified. Associated factors included female sex, higher disease activity, severe pain, functional limitation, and absence of remission. Notably, depressive symptoms were also observed in patients in clinical remission, in addition to the influence of the family context. JIA is associated with a significant prevalence of depressive symptoms, even during phases of clinical remission, highlighting that its impact extends beyond inflammatory control. The influence of clinical and psychosocial factors, combined with the heterogeneity of findings, reinforces the complexity of this relationship. In this context, the need to incorporate systematic mental health screening and multidisciplinary follow-up in JIA management is emphasized, aiming not only at disease control but also at promoting patients' quality of life and well-being.

Palavras-chave: Juvenile Idiopathic Arthritis; Depressive Symptoms; Prevalence.