Reply to:

Controversies in foot ultrasound assessment in juvenile idiopathic arthritis

Sirs,

Dr Segarra expresses concern that the US evaluation of the MTP1 and MTP2 would be insufficient to diagnosis juvenile idiopathic arthritis (JIA) and he suggests the inclusion of more joints. However, a large number of structures (joints, tendon, enthesis) of the foot were evaluated, thus a comprehensive evaluation of the foot was done and several US findings were reported (1). Additionally, unlike MRI, US is not able to show bone oedema, but it has proven to be sensitive to other inflammatory findings (2). I do agree with Dr Segarra when he said that we did not specify the grade of greyscale synovitis (GS-synovitis). We did not consider scoring it because the study was performed on JIA children in clinical remission and the aim of the study was to distinguish US chronic or residual findings (particularly in GS) in patients from healthy children. On the other hand, a recent publication of a novel US joint-specific scoring system let score the disease activity in future studies focus on monitoring the response of treatment in JIA (3).

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Please address correspondence to: Paz Collado Ramos, Rheumatology Department, Transitional Care Clinic, Hospital Universitario Severo Ochoa, Av Orellana s/n, 28911 Madrid, Spain. E-mail: paxko10@gmail.com Competing interests: none declared. © Copyright CLINICAL AND EXPERIMENTAL RHEUMATOLOGY 2022.

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