

Resource

Hydrocholoroquine

Hydroxychloroquine is not prescribed frequently for the treatment of juvenile idiopathic arthritis (JIA), but may be used as part of a treatment programme alongside one or two other disease modifying antirheumatic drugs (DMARDs).

Print



Other names

Plaquenil, Quinoric

How is it taken?

Tablet

How often?

Typically, once daily (may be adjusted by weight)

How long for?

Long term

Background

When it was found that chloroquine, used to prevent malaria, was beneficial for inflammatory arthritis, it was modified to hydroxychloroquine, which has very few side effects.

Usage

Rarely used in JIA but may provide extra benefit when used alongside other DMARDs, often as triple therapy. It is also used when JIA is associated with skin changes and a condition called mixed connective tissue disease (MCTD). The frequency of giving it is adjusted by weight or the tablet is broken to the right dose (dispersed in water).

Eye tests

Hydroxychloroquine at a dose of less than 6mg/kg rarely causes side effects. The main concern is that it may crystalise at the back of the eye and affect colour vision. This is reversible following cessation of the medication. It takes many years for this to occur and eye screening should occur after five years of treatment.

Sunburn

Hydroxychloroquine can make the skin more sensitive to sunlight, so always make sure your child has adequate protection (t-shirt, hat and regular applications of sun cream) even for short periods.

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