Naproxen treatment in patients with Acute Rheumatic Fever

Ekici F., Aktaş D., Çetin İ., Kocabas A., Ari M.E.
Department of Pediatric Cardiology, Ankara Children’s Hematology and Oncology Research and Training Hospital, Ankara, Turkey

Objectives: To evaluate the effectiveness and side effects of Naproxen in patients diagnosed with acute rheumatic fever (ARF). The frequency of rheumatic valvulitis in the patients who were given Naproxen, was also evaluated at the long term follow up.

Methods: We reviewed clinical, laboratory and therapeutic data of 167 patients who diagnosed with ARF according to revised Jones criterions between 2009-2013 years. 96 cases who had presented with acute arthritis, were included in this study. Patients were classified into two groups; Group1: consisted of 50 patients who treated with Naproxen (15 mg/kg/d)), Group2: consisted of 46 cases who treated with Aspirin (80-100 mg/kg/d). All patients have been followed with echocardiography for a mean time of 2.8 +/- 0.3 years (ranged: 2- 4 years). The study protocol was approved by our hospital Ethic Committee.

Results: The mean age of patients was 10.7 years. Four cases in both groups had past history of ARF. Mild degree valvular regurgitation was detected in 40 cases (80%) in groups 1 and 36 cases (78%) in group 2 at the initial examination. High grade fever was detected in 27 cases (28 %) in all study population. After medication started, fever resolved quickly in both groups (median: 1 day, ranged 1 to 3 days). The clinical activity resolved completely within a few days, The median time to normalization of arthritis was 2 days in both groups. Erythrocyte sedimentation rate normalized at the median of 10 days in both groups ( ranged: 3-14 days). Except one case, no side effect was observed in Group 1. The treatment with Aspirin was discontinued in eight cases (17.4%), due to elevated hepatic enzymes levels. Treatment failure was not observed in both groups. None of the patients had developed new valvular regurgitation during follow-up. The rheumatic valvular involvement persisted in 26 cases (52%) in group 1 and 25 cases (54.3%) in group 2, respectively.

Conclusion: Pediatrician can use Naproxen in patients with ARF, as a safe and effective alternative drug option.