Blau's Disease / Juvenile Sarcoidosis
Version of 2016

3. EVERYDAY LIFE

3.1 How might the disease affect the child and the family’s daily life?
The child and the family may experience various problems before the disease is diagnosed. Once the diagnosis has been made, the child will need to visit doctors (a paediatric rheumatologist and an ophthalmologist) regularly to monitor disease activity and adjust the medical treatment. Children with difficult joint disease may need physiotherapy.

3.2 What about school?
The chronic course of the disease may interfere with school attendance and performance. A good control of the disease is essential to allow school attendance. Information about the disease at school may be useful, in particular to give advice on what to do in case of symptoms.

3.3 What about sports?
Patients with Blau syndrome should be encouraged to perform sports; limitations will depend on the control of the disease activity.

3.4 What about diet?
There is no specific diet advised. However, children taking corticosteroids should avoid extra sweet and salty food.
3.5 Can climate influence the course of the disease?
No, it cannot.

3.6 Can the child be vaccinated?
The child can be vaccinated except with live vaccines when under treatment with corticosteroid, methotrexate or TNF-α inhibitors.

3.7 What about sexual life, pregnancy, birth control?
Patients with Blau syndrome do not have fertility problems due to the disease. If they are being treated with methotrexate, proper birth control should be used, since the drug may have side effects on a foetus. There are no safety data concerning TNF-α inhibitors and pregnancy, so patients must stop using these when they wish to become pregnant. As a general rule, it is better to plan a pregnancy and adapt treatment in advance and propose a follow-up adapted to the disease.