



<https://printo.it/pediatric-rheumatology/GB/intro>

## **Behcet's Disease**

Version of 2016

### **3. EVERYDAY LIFE**

#### **3.1 How might the disease affect the child and the family's daily life?**

Like any other chronic disease, BD does affect the child and the family's daily life. If the disease is mild, with no eye or other major organ involvement, the child and family generally can lead a normal life. The most common problem is recurrent mouth ulcers, which may be troublesome for many children. These lesions may be painful and can interfere with eating and drinking. Eye involvement may also be a serious problem for the child and family.

#### **3.2 What about school?**

It is essential to continue education in children with chronic diseases. In BD, unless there is eye or other major organ involvement, children can attend school regularly. Visual impairment may require special educational programs.

#### **3.3 What about sports?**

The child can participate in sports activities as long as they exhibit only skin and mucosa involvement. During attacks of joint inflammation, sports may need to be avoided. Arthritis (joint inflammation) in BD is short-lived and resolves completely. The patient should be able to resume sports activities after the inflammation is gone. However, children with eye and blood vessel problems may need to limit their activities. Prolonged standing should be discouraged in patients with

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blood vessel involvement of the lower extremities.

### **3.4 What about diet?**

There is no restriction regarding food intake. In general, children should observe a balanced, normal diet for their age. A healthy, well-balanced diet with sufficient protein, calcium and vitamins is recommended for a growing child. Overeating should be avoided in patients taking corticosteroids because these drugs may increase appetite.

### **3.5 Can climate influence the course of the disease?**

No, there is no known effect of climate on BD.

### **3.6 Can the child be vaccinated?**

Immunisations should be discussed with your doctor who will help decide which vaccines your child can receive. If a patient is being treated with an immunosuppressive drug (corticosteroids, azathioprine, cyclosporine-A, cyclophosphamide, anti-TNF, etc.), vaccination with live attenuated viruses (such as anti-rubella, anti-measles, anti-parotitis, anti-polio Sabin) must be postponed.

Vaccines that do not contain living viruses (tetanus, diphtheria, inactivated polio, hepatitis B, pertussis (whooping cough), pneumococcus, haemophilus, meningococcus, influenza (flu vaccine by injection) can be administered.

### **3.7 What about sexual life, pregnancy and birth control?**

One of the major symptoms that can affect sexual life is the development of genital ulcers. These can be recurrent and painful and can therefore interfere with sexual intercourse. Women with BD typically have a mild form of the disease and should experience a normal pregnancy. Contraception should be considered if a patient is being treated with immunosuppressive drugs. Patients are advised to consult their doctor about contraception and pregnancy.