Arthritis Foundation®

JOINT Matters

When Care Is Out of Reach: The Pediatric Rheumatology Shortage

Vi Davis, an Alaska resident seated in the audience at the 2026 Arthritis Foundation's **Pathways Conference**, is a fierce advocate for arthritis awareness. Vi's experience upon being diagnosed at 18 months with systemic juvenile idiopathic arthritis was similar to what many other children with arthritis face in a state without a pediatric rheumatologist. They have three options: either travel to the nearest state for care, wait for a pediatric rheumatologist to visit their state or see a rheumatologist for adults, who probably isn't trained in the nuances of treating children.

What Vi experienced in Alaska is part of a much larger national pattern. Across the U.S., pediatric rheumatologists are in short supply. In fact, **26 states have five or fewer pediatric rheumatologists**, and as practicing pediatric rheumatologists retire, they leave critical gaps in the workforce. **In 2020**, there was just one pediatric rheumatology subspecialist for every 370,000 children, and while this deficit is expected to improve, there will still be fewer than 0.5 specialists per 100,000 children in 2040.

Yet, even with immense demand, not enough pediatric rheumatologists are entering the workforce.

So, what's driving this shortage?

Workforce shortages are an ongoing concern in both adult and pediatric rheumatology. To narrow the adult rheumatology gap, one solution is to increase the number of slots for rheumatology fellowship training. The Arthritis Foundation, for example, through our **Clinical Rheumatology Fellowship Program**, funds extra rheumatology fellowship slots to connect rheumatology programs with more medical trainees. This approach, however, does not work the same way in addressing the pediatric rheumatology workforce shortage.

"The good news is that if you apply to pediatric rheumatology, there is a very high chance you are going to end up where you want," says Randy Cron, MD, PhD, pediatric rheumatology fellowship program director and professor at the University of Alabama at Birmingham. "But there are just so few applicants — that is the biggest problem."

According to the **American College of Rheumatology**, 24 of 44 available positions in 2026 were filled (54%), down from 27 of 55 positions in 2025 (49%), highlighting both a 20% decrease in total available positions and an 11% decline in the number of positions filled, despite a modest increase in fill rate. In other words, the number of pediatric rheumatologists being trained and entering the workforce is going down.

Several factors are limiting the pipeline of new specialists from keeping pace with projected workforce needs. Pediatric rheumatology faces structural barriers, such as limited exposure during medical school and pediatric residency, as well as declining interest in pediatrics overall. Pediatric rheumatology fellowships require an additional three years of training that includes both clinical work and research, perpetuating medical education debt.

"Students graduate with about $250,000 in debt and often choose higher-paying fields. Pediatric rheumatology requires three additional years of training with lower pay," says Kyla Driest, MD, pediatric rheumatologist and program director of the pediatric rheumatology fellowship program at Nationwide Children's Hospital.

More recently, a new recruitment challenge has emerged.

"Pre-COVID, fellowship interviews were conducted in person, and candidates were more willing to relocate after visiting the hospital system, meeting faculty and fellows and experiencing the surrounding city," says Rebecca Sadun, MD, PhD, associate professor and program director for Duke University's pediatric rheumatology fellowship and med-peds rheumatology fellowship. "Without in-person interviews, recruitment has been extra challenging, especially in less-traveled regions like the Southeast."

ADVOCACY UPDATE

In response to the drastic cuts to the Centers for Disease Control and Prevention Arthritis Program and the removal of the National Institute of Arthritis and Musculoskeletal and Skin Diseases Director Lindsey Criswell, MD, MPH, Arthritis Foundation CEO Steve Taylor, along with members of our advocacy team, went to Washington, DC. They met directly with key staff of the committees that oversee appropriations and the National Institutes of Health, as well as with Sen. Shelley Moore Capito, who chairs the appropriations health subcommittee.

The goal of this advocacy effort is to:

1. Bring visibility and build urgency for smaller programs, like the CDC Arthritis Program.

2. Convey concerns about Dr. Criswell's removal, and take a visible stand on the funding changes happening across the NIH.

Are you ready to make a difference? **Take the first step by visiting the Arthritis Foundation's Action Center**. There, you can find a topic that resonates with you and start advocating for change.

Further, due to low patient volume, high overhead costs and the need for multidisciplinary teams, the specialty does not lend itself to private practice, which is more lucrative.

Even within hospital systems, its financial value is often indirect. Pediatric rheumatology generates money for hospitals through referrals, laboratory tests and infusions. However, the main revenue-makers are inpatient care and surgical procedures. Pediatric rheumatology is primarily an outpatient specialty, and while practitioners do perform joint injections, these procedures receive nominal reimbursements from insurance companies.

"Health care financing in this country has been broken for a long time, and with pediatric rheumatology being such a small field, it is really hard to move the needle quickly to alleviate the workforce shortage problem. Systemic changes are needed," says Jay Mehta, MD, MS, professor of clinical pediatrics and director of the pediatric rheumatology fellowship program at Children's Hospital of Philadelphia.

Efforts to address the workforce shortage require a long-term, multi-pronged approach, experts agree. Fellowship training programs should consider flexible training models, such as a **two-year fellowship for those interested in clinical careers without research duties**. Potential solutions include building structured exposure pathways in medical school and during pediatric residency training, addressing mentorship gaps, increasing funding sources for in-person interviews and improving compensation through policy efforts. Another avenue to ameliorate current and projected workforce shortages will be to train more advanced practice providers.

While the path requires significant investment and presents obstacles, those in the field agree that pediatric rheumatology is a fulfilling career.

"When I first started practicing, a significant number of kids with arthritis needed assistive mobility devices. Those days are essentially gone, particularly if we catch them early enough in disease progression," says Dr. Cron. "It's extremely rewarding work, and most of us would never have done anything else."

Now a young adult living with arthritis, Vi says solutions must go beyond workforce numbers to include access, awareness and support for people living with invisible disabilities. Vi is optimistic that, through continued **advocacy with the Arthritis Foundation**, Alaska will have its first pediatric rheumatologist in the near future.

"As I pursue my master's in clinical psychology, I want to help build support in Alaska," says Vi. "I hope that through the work I do and the opportunities I pursue, it could eventually lead to bringing someone to Anchorage, ideally in a semi-permanent or permanent role. That would be the ultimate goal."

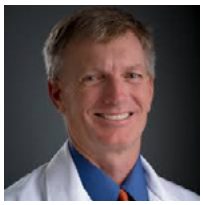
The Arthritis Foundation is committed to helping close the rheumatology workforce gap through our adult, pediatric and med-peds fellowships. **Julie Campbell, MD**, a former Arthritis Foundation-funded clinical rheumatology fellow, is now the first full-time pediatric rheumatologist in Montana. And through a fellowship program supported by the Foundation, **Amanda Moyer, MD**, became the only full-time pediatric rheumatologist in Oklahoma. She is working to build a pediatric rheumatology division at the University of Oklahoma College of Medicine.

In addition, the Arthritis Foundation invests in medical curriculum development through our **Community Health Program** to bring attention to rheumatology. The American College of Rheumatology has also put together a **multi-year plan** to work toward a variety of solutions to the pediatric rheumatology workforce shortage.

The Foundation thanks Drs. Cron, Sadun, Mehta and Driest for their insight into developing this article.

FEATURED IN THIS STORY:

Vi Davis, Arthritis Foundation Advocate



Randy Cron, MD, PhD, University of Alabama at Birmingham

Kyla Driest, MD, Nationwide Children's Hospital

Rebecca Sadun, MD, PhD, Duke University

Jay Mehta, MD, MS, Children's Hospital of Philadelphia

2026 Pathways Conference Awards

At this year's **Pathways Conference**, the Arthritis Foundation presented the Charles B. Harding Award for Distinguished Service to Andy Chan, MD, PhD; the 2025 Lee C. Howley Senior Prize for Arthritis Scientific Research to Elaine Husni, MD, MPH; and the 2025 Lee C. Howley Junior Prize for Early Career Investigators in Arthritis Research to pediatric rheumatologist Mileka Gilbert, MD, PhD.

The 2025 Charles B. Harding Award

For 50 years, the Charles B. Harding Award for Distinguished Service has been the highest level of national volunteer recognition from the Arthritis Foundation. The award was established in 1976 in honor of one of the Foundation's most well-known chairs, a nationally regarded philanthropist.

This year's deserving Harding Award honoree was Andrew Chan, MD, PhD — a distinguished scientist, physician and longtime volunteer whose leadership has helped advance the Arthritis Foundation's mission nationwide.

Recently retired from Genentech as senior vice president of research biology, Dr. Chan led teams focused on discovering new treatments for serious diseases. He is co-inventor of ocrelizumab, a therapy that has transformed care for people living with multiple sclerosis. Trained as both a physician and a scientist, Dr. Chan earned his MD and PhD from Washington University School of Medicine after studying chemistry at Northwestern University. His career has centered on understanding the immune system and the role it plays in autoimmune disease.

For more than two decades, Dr. Chan has brought that expertise to his volunteer leadership with the Arthritis Foundation. Since joining the Northern California board in 2003, he has helped strengthen the organization at both the local and national levels.

Recognizing the urgent need for more rheumatology specialists, Dr. Chan has championed workforce development efforts to train the next generation of physicians — expanding access to expert care for people living with arthritis. As a member of the Foundation's national **Medical and Scientific Advisory Committee (MSAC)**, he has helped guide research investments toward the most promising pathways for better treatments and, ultimately, cures.

In Northern California, Dr. Chan's leadership of the Medical and Scientific Committee has supported research internships for emerging scientists, elevated educational programming like the annual Knowles Lecture and strengthened the local **Walk to Cure Arthritis**.

Through his generosity, insight and steadfast commitment, Dr. Chan has helped translate the Arthritis Foundation's mission into meaningful progress for millions. We're proud to recognize him as the recipient of the 2025 Harding Award for Distinguished Service.

The 2025 Lee C. Howley Sr. Prize Recipient

Elaine Husni, MD, MPH, received her undergraduate education from Boston College and her master's and medical degrees from Boston University School of Medicine. She completed her residency at Beth Israel Deaconess Medical Center and Harvard Medical School, and her fellowship at Brigham & Women's Hospital. She is currently the vice chair in the department of rheumatic and immunologic diseases at Cleveland Clinic.

Trained in rheumatology, with a career-long emphasis on improving outcomes in inflammatory arthritis, her research integrates patient-reported outcomes, precision medicine and immunologic mechanisms underlying treatment response and nonresponse. She is the recipient of the Arthritis Foundation Rheumatoid Arthritis Research Program grant, "Defining a Personalized Treatment Approach to Rheumatoid Arthritis: Using Genetic Markers of TNFi Response," and has shared her work nationally, including at the **RA Research Summit**. Her program bridges rigorous science with real-world impact to advance individualized care and quality of life for patients living with arthritis.

Dr. Husni's volunteer service with the Arthritis Foundation began when she was a rheumatology trainee, helping lead early community health and fundraising efforts — including a Boston-area 5K event. Since then, she has served locally and nationally across the Foundation's medical and scientific activities, supported major fundraising events for the Foundation, such as **Walk to Cure Arthritis** and **Cleveland Magazine's Silver Spoon Awards**, and participated in multiple think tank initiatives (including patient-reported outcomes, psoriatic arthritis and rheumatoid arthritis). She regularly supports **Living Well patient education** and is a member of the Arthritis Foundation Medical and Scientific Committee (MSAC).

"I'm deeply honored and grateful to receive the 2025 Lee C. Howley Sr. Prize. The Arthritis Foundation has shaped my career since training, and this recognition fuels my commitment to arthritis research and patients," said Dr. Husni.

The 2025 Lee C. Howley Jr. Prize Recipient

The Arthritis Foundation is pleased to announce the 2025 Lee C. Howley Jr. Prize to Mileka Gilbert, MD, PhD. This prize recognizes an early career researcher who demonstrates a firm commitment to arthritis research, including impacting patient outcomes and quality of life, with a strong record of service to the Foundation.

Dr. Gilbert is associate professor of pediatrics and senior associate dean for engagement at the Medical University of South Carolina (MUSC). She completed undergraduate studies at the University of Maryland Baltimore County in 2001, and earned her MD and PhD degrees in 2009 from the University of North Carolina. She trained in general pediatrics at the Virginia Commonwealth University Health System in 2012 and completed fellowship training in pediatric rheumatology at the University of Texas Southwestern Medical Center in Dallas. She joined the faculty in 2015 in the Department of Pediatrics at MUSC, where she is the site primary investigator for the Pediatric Rheumatology Care & Outcomes Improvement Network. Dr. Gilbert has led quality improvement and implementation science work to improve outcomes of disease and mental health in children with **juvenile arthritis** and other rheumatic diseases.

She is a member of the Arthritis Foundation MSAC and Community Health Expert Working Group. Dr. Gilbert is also the co-chair of the Arthritis Foundation Community Health and Workforce Summit, is now serving on the Foundation's Vaccine Policy Task Force, has also reviewed grant proposals for Arthritis Foundation awards and participated in **Jingle Bell Runs**.

"I am very honored to receive this prize, especially from an organization that inspires inclusive and collaborative teamwork in the holistic care of children with juvenile arthritis," said Dr. Gilbert.

FEATURED IN THIS STORY:

Andy Chan, MD, PhD, Genentech, Inc., retired

Elaine Husni, MD, MPH, Cleveland Clinic

Mileka Gilbert, MD, PhD, Medical University of South Carolina

Tracking the Immune Triggers of Rheumatoid Arthritis

Through millions of years, our bodies have evolved to have a multiplicity of immune cell types to fight against pathogens and cancers. However, in autoimmune diseases, the immune system launches an unabated attack on the body's own cells, tissues and organs. Identifying the primary immune culprits and their triggers remains an ongoing quest in rheumatoid arthritis (RA), a common and devastating autoimmune disease.

To take a deeper dive into this question, the Arthritis Foundation has awarded an **RA Research Program** grant to Anna Helena Jonsson, MD, PhD, from the University of Colorado Anschutz, and Ayano Kohlgruber, PhD, from Boston Children's Hospital. Using sophisticated molecular and genetic techniques, they will investigate the targets of a special type of immune cell, the CD8+ granzyme K-positive T cell, which is replete in joint tissue in RA, where it is thought to trigger inflammation and joint destruction.

"We are really delighted that the Arthritis Foundation decided to support early career investigators," says Dr. Kohlgruber. "The Foundation's support is essential for supporting ambitious and early-stage research that has the potential to grow into a much bigger project."

Autoimmune diseases are primarily caused by the disruption of the adaptive immune cells, the T and B cells. However, there is a remarkable variety of these cell types. For example, although there are two main functional categories of T cells — the helper (CD4) and the cytotoxic (CD8) T cells — each encompasses numerous specialized subgroups. In recent years, research has revealed that CD8 subtypes are just as abundant as the more commonly studied CD4 subtypes in RA synovium. Further, Dr. Jonsson's group has identified a more specialized type of CD8 T cell, positive for the granzyme K protein, that is enriched in the joint.

Typically, CD8 T cells circulate throughout the body, seeking virally infected cells and cancer cells. Their job is to act as assassins, so if they find a virally infected cell, like one infected with influenza or COVID-19, these T cells kill the infected cell to terminate the infection. But the CD8+ granzyme K-positive T cells are different.

"They are not the killer phenotype, but are rather more pro-inflammatory," says Dr. Jonsson. "We think that there is a specific synovial protein that the CD8+ granzyme K-positive T cells recognize in RA, but we really have no idea what that is."

Why would CD8+ granzyme K-positive T cells turn on healthy joint tissues? The researchers posit that these cells may have initially reacted to a virus, and years later, a harmless synovial protein might have had the misfortune of resembling a component of the virus that triggered an immune response. Thus, although these T cells initially responded only to viruses, they eventually began reacting to self-tissues. The researchers will test their hypothesis in the Arthritis Foundation-funded study.

Dr. Kohlgruber's team will look for antigens or synovial proteins that could serve as targets for CD8 granzyme K-positive T cells. They will engineer synthetic T cells expressing receptors similar to those of granzyme K-positive T cells. They will also create target cells that present antigens to these synthetic T cells.

"When you mix these two cell populations and the T cells recognize a protein out of tens of thousands that are presented, they will be marked biochemically," says Dr. Kohlgruber. "We can then pull out those cells and perform next-generation sequencing to identify what peptides are triggering the T cells."

Taking the research onward from this stage, Dr. Jonsson's team will use state-of-the-art spatial transcriptomics to localize these antigen-specific T cells.

"This technique has been available now for two or three years, and everyone is really excited, because it allows us to put these cell types of interest in their actual position in the tissue," says Dr. Jonsson. "Now we can also identify antigen-specific T cells using this technology. So, we can ask, are the antigen-specific T cells in the synovial lining? Are they next to blood vessels? So, where are they, and what are their cellular neighbors?"

If CD8 granzyme K-positive T cells are the leading players in RA, then CAR-T (chimeric antigen receptor-T) cell, CAR-Treg or mRNA vaccine therapy could potentially be considered as a means to turn off or dampen the autoimmune response.

"This is a very special kind of project; it cannot be done in tiny pieces. It has to be pursued as a greater, integrated effort," says Dr. Jonsson. "We needed a funding mechanism willing to support something truly novel, including new technologies to explore entirely new questions. The Arthritis Foundation's willingness to invest in that novelty was essential."

FEATURED IN THIS STORY:

Anna Helena Jonsson, MD, PhD, University of Colorado Anschutz

Ayano Kohlgruber, PhD, Boston Children's Hospital

Announcements

Inflammatory Arthritis Research Summit

The Arthritis Foundation and the Hospital for Special Surgery (HSS) successfully co-hosted the Inflammatory Arthritis (IA) Research Summit Feb. 20 and 21 at HSS in New York City. Unlike the 2024 Rheumatoid Arthritis (RA) Research Summit, this year's event focused more broadly on IA, including RA, psoriatic arthritis (PsA) and axial spondyloarthritis (axSpA), to reflect the Arthritis Foundation's growing efforts to support research on inflammatory arthritis. Read full news article.

State of Arthritis Research & Clinical Care Seminar

The Arthritis Foundation hosted our second State of Arthritis Research and Clinical Care webinar for health care professionals on March 13. The audience heard from Thomas Rennie, MD, Rheumatology Associates of South Texas, and Arthritis Foundation staff leaders about accelerating the diagnosis of psoriatic arthritis, advancing arthritis science and accessing patient resources and support services. View recording of seminar.

2026 Arthritis Foundation Osteoarthritis Clinical Trial Network Investigators Forum

Members of the Arthritis Foundation's Osteoarthritis Clinical Trials Network (OACTN) gathered in Atlanta to hear updates on Foundation-backed osteoarthritis (OA) studies as well as our commitment to advancing research alongside institutions like the National Institutes of Health. The meeting featured keynote talks and presentations on Foundation-funded work, emphasizing progress in OA science and broader public health priorities. Attendees also visited Emory Healthcare's Sports Performance and Research Center (SPARC) facility, home to advanced biomechanics and imaging research, collaborations with the Atlanta Falcons, and a site for the PIKASO trial. Cutting-edge technology at SPARC is generating insights that could transform prevention and treatment of joint injuries and OA. Read full news article.

2026 Pathways Conference

Nearly 400 arthritis patients, advocates, caregivers and health care professionals gathered in Seattle March 27 and 28 for the Arthritis Foundation's Pathways Conference. It included a panel session, called "Become a Change Agent," which included speakers who have advocated for more transparency in their health coverage and in insurers' prescription drug formulary decisions. Pathways also had a science breakout session on "Translating Science to Inspire Giving." This session began with an overview of the Arthritis Foundation's science program and its place within the broader research-funding landscape, followed by a talk on ways to translate this knowledge into compelling conversations with potential donors, helping them clearly understand the impact and value of supporting the Foundation's scientific work.

PARTNERS FOR PATIENTS
Arthritis Foundation

Partners for Patients

As a health care provider, you're invited to join Partners for Patients, a program that connects you with patient education resources and a supportive community through the Arthritis Foundation to help improve patient care and outcomes. By becoming a partner, you'll gain access to tools that connect your patients with vital Arthritis Foundation services and support, fostering stronger collaboration and better results. Once you join, we'll highlight our partnership with you in both patient and medical communities and keep you informed with the latest updates and advancements in arthritis research and care. Learn more about the Partners for Patients program.

Arthritis Foundation Request for Proposals

2026 Psoriatic Arthritis (PsA) Research Program

The mission of the Arthritis Foundation's PsA research program is to advance understanding of psoriatic arthritis and improve treatment, with the ultimate goal of improving the lives of people living with PsA. Funding is available for up to two years and up to $250,000 total (inclusive of 8% indirect costs). This RFP is open to proposals broadly focused on psoriatic arthritis. Areas of interest may include, but are not limited to:

- Biomarkers
- Risk factors for PsA development
- PsA prevention
- Treatment of PsA
- Underlying mechanisms with clinical relevance
- The role of comorbidities in disease progression and treatment

Proposals that include interdisciplinary teams are strongly encouraged. Applications must be submitted through ProposalCentral. **The deadline for the letter of intent is Tuesday, May 19, 2026, at 2:00 p.m. ET.**

Meetings and Symposia

JA Family Summit, Indianapolis, Indiana, July 16–19, 2026

The annual JA Family Summit (previously known as the National JA Conference) is the Arthritis Foundation's signature, nationwide event for families affected by juvenile arthritis and childhood rheumatic diseases. This four-day educational conference focuses on health, wellness and fun for families, children and teens (ages 6 months and up) and young adults (ages 18–30) affected by juvenile arthritis and related childhood rheumatic diseases. Learn more about registration, hotel reservations and volunteer opportunities.

COMMUNITY IN ACTION

Make an impact! Join the Arthritis Foundation's signature events happening at a location near you.

Walk to Cure Arthritis celebrates 25 years of progress this spring. Join us to pick up the pace in raising awareness, influencing positive policies, funding groundbreaking research and producing life-changing resources for millions of people living with arthritis.

Carolina Hills Classic Bike Tour, presented by Amgen, is a fully appointed and e-bike-friendly road cycling adventure in the foothills of the unmatched beauty of the Blue Ridge Mountains. Fundraising from this event fuels Arthritis Foundation advocacy, scientific research and life-changing programs. Join us in May to explore the quiet winding roads, vibrant art scene and welcoming hospitality of this premier South-eastern cycling destination.

Orthopedic Paceline Challenge is calling for nominations across the country for orthopedic surgeons. Clip in for an iconic cycling experience as an orthopedist ambassador at the Carolina Hills Classic Bike Tour in May 2026. Members of the Medical Honoree Paceline will enjoy epic riding and national recognition as they raise funds for a better future for everyone living with arthritis.

California Coast Classic Bike Tour, presented by Amgen, is a scenic bike ride that takes place over eight days and covers 525 miles along the Pacific coast on U.S. Highway 1. The tour starts in the heart of San Francisco and ends on the iconic strand of Los Angeles.

Ride Your Way With Arthritis Cycling Experience allows you to attend our signature cycling events virtually if you are unable to attend in person.

To learn more about our events and to participate, visit arthritis.org/events.

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Educational Resources for Your Patients

Arthritis Foundation Webinars

Arthritis Foundation webinars are educational events with leading arthritis experts. These online seminars are designed to help patients better manage their pain and other symptoms. Learn about our upcoming webinars.

Live Yes! Connect Groups

Connect Groups provide supportive social connections and are open to parents/guardians of children with rheumatic diseases and adults with arthritis or rheumatic diseases. These virtual and in-person groups bring people together for fun social and informative educational events and activities focused on mutual support and positive coping strategies for living well. Learn about our Connect Groups and upcoming events.

Living Well Events

Arthritis creates a unique set of challenges that require an equally unique set of solutions. Whether it's managing symptoms like pain and inflammation or discovering new ways to achieve everyday tasks, our in-person Living Well events empower you to take control of your condition. Our upcoming Living Well events.

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