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**EVOLIUCINĖ MEDICINA:
ŽMOGAUS RAIDOS PERSPEKTYVOS IR SVEIKATA
BESIKEIČIANČIOJE APLINKOJE**

**EVOLUTIONARY MEDICINE:
PERSPECTIVES ON HUMAN DEVELOPMENT AND HEALTH
CONSEQUENCES IN A CHANGING ENVIRONMENT**

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ADULT-ONSET STILL'S DISEASE – A DIAGNOSTIC CHALLENGE AND ECONOMIC BURDEN: A CASE REPORT AND LITERATURE REVIEW

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Background and Aim: Adult-Onset Still's Disease is a rare multisystem autoinflammatory disorder characterised by nonspecific clinical manifestations that often delay diagnosis. The disease may mimic infectious, autoimmune and malignant conditions, leading to extensive diagnostic workup and prolonged hospitalisation. The aim of this study was to present a clinical case of Adult-Onset Still's Disease and review the literature regarding its diagnostic complexity and associated economic burden.

Materials and Methods: A literature review was performed using the PubMed database, including English-language articles on Adult-Onset Still's Disease, diagnostic challenges, and economic burden. In addition, a clinical case of a patient treated at Vilnius University Hospital Santaros Klinikos was retrospectively analysed.

Results: A 46-year-old woman presented with episodic fever up to 39.5 °C, polyarthralgia, sore throat, and transient rash involving the chest and neck regions. Laboratory investigations demonstrated neutrophilic leukocytosis, elevated inflammatory markers, increased liver enzyme levels, and marked hyperferritinemia. Due to the nonspecific clinical presentation, infectious, autoimmune, haematological, and oncological diseases were considered during the differential diagnostic process. After extensive laboratory and instrumental evaluation and exclusion of other conditions, Adult-Onset Still's Disease was diagnosed and treatment with tocilizumab was initiated. The patient required a prolonged 36-day hospitalisation, reflecting the considerable diagnostic complexity of the disease. Literature analysis showed that the absence of specific diagnostic tests and the need for diagnosis by exclusion frequently result in delayed diagnosis, prolonged hospitalisation, increased complication risk and substantial healthcare costs.

Conclusions: Adult-Onset Still's Disease remains a diagnostic challenge due to its nonspecific clinical presentation and the need to establish the diagnosis by exclusion. Prolonged hospitalisation and the extensive diagnostic workup contribute to a significant healthcare cost burden.

Keywords: adult-onset still's disease, differential diagnosis, economic burden