



Kawasaki Disease kills children !!!

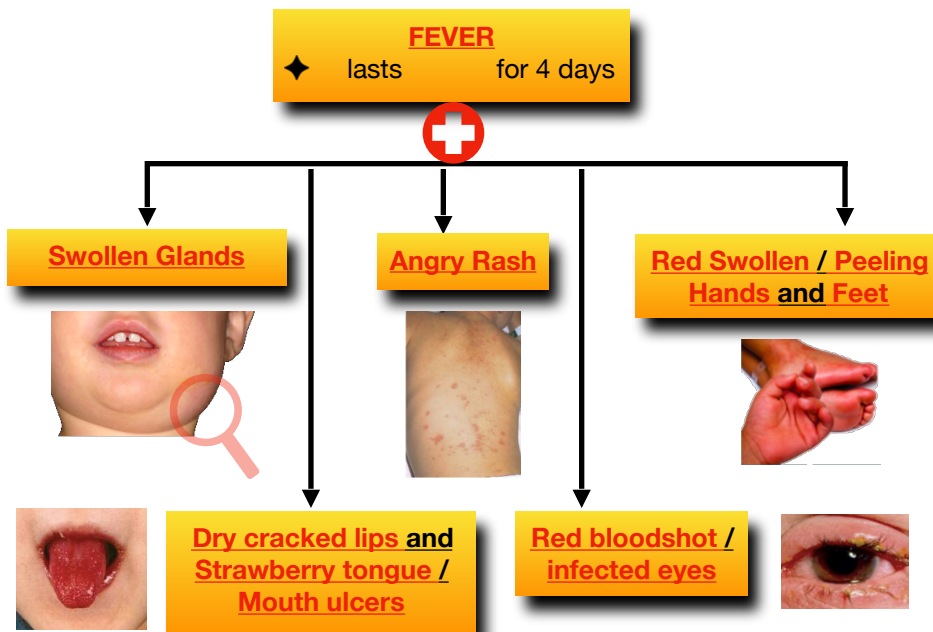
Kawasaki Disease (Mucocutaneous lymph node syndrome) mostly strikes babies and children under the age of 5. It initially presents as a high fever that lasts for 5 days or more AND at involves at least three of the following five signs: **swollen glands, an angry rash, red swollen hands and feet, dry cracked lips/strawberry tongue, and bloodshot/infected eyes**. In many cases, this disease causes serious and irreparable damage to the heart (usually in the form of aneurysms caused by inflammation in coronary arteries). Since Kawasaki Disease's symptoms are commonly seen in other general infections – including influenza and bacterial meningitis, for example – misdiagnosis is tragically commonplace among parents and GPs.

<https://www.kawasakidiseaseuk.org>

Kawasaki Disease is now recognized as the leading cause of coronary heart disease in children with effects that may be permanent for those who survive into adult life. It is the prime suspect in death by non-congenital heart failure among children and young adults. There has been a relentless increase of Kawasaki Disease-related hospital admissions (from 507 in 2015/16 to 628 in 2017/18 - of which two-thirds were emergencies) in England and Wales, not to mention the undiagnosed, misdiagnosed, and adult statistics. In addition, there is some evidence of an up to 10% chance that susceptibility to Kawasaki Disease is hereditary.

If its victims survive their childhood, those worst affected and undiagnosed continue to have myocardial and vascular complications as adults. The number of Kawasaki Disease victims later diagnosed has increased by 1,400 since 2009: and reported cases of Kawasaki Disease probably represent just the tip of the iceberg.

Signs and Symptoms



How is Kawasaki Disease treated?

If diagnosed within the first 10 days of acute Kawasaki Disease, high doses of intravenous immunoglobulin (IVIG) and aspirin have proven to be most effective in combating inflammation and in reducing the chance of sustaining damage to the coronary arteries. These treatments continue until the initial phase subsides.

What are the consequences if the disease is not properly treated?

Initially, its features including fever, swollen lymph nodes (or swollen glands) in the neck, rashes, and mucous membrane inflammation can all be extremely uncomfortable and may last for 1 to 3 weeks. With treatment, the fever and other signs and symptoms usually subside within 24 hours.

If your child has 4 or more of the above signs for more than 4 days, ask the doctor for a heart scan by a paediatric cardiologist.

Untreated, in the later stages of Kawasaki Disease, about 25% of affected children develop heart problems of varying severity.

What can I expect once my child comes home from the hospital?

Once discharged from hospital, your child may continue to be tired and have a poor appetite. However, unless otherwise specifically advised by your doctor, you should not attempt to limit your child's activity or diet. Although re-occurrence of KD is extremely rare, should symptoms and signs recur, call your doctor immediately.

You should call your doctor if any of the following occurs:

1. The fever returns within the first week after leaving hospital.
2. Tenderness of the large joints (hips, knees) making your child unwilling to walk or move about as before.

◆ *Routine live virus immunisation for measles, mumps, and rubella (MMR) and chickenpox (varicella) should be delayed for 12 months following IVIG treatment because the IVIG contains antibodies that will neutralise the vaccines. If your child has a history of eczema, KD may cause a flare-up of this rash, which is very itchy. The usual treatment for eczema should be started and you should consult your paediatrician.*

KD Support



Kawasaki Disease UK aims to help parents self-diagnose and identify the classic symptoms by day 5, before the critical phase of heart damage 11-13 days of the onset and aid recovery with treatment that prevents cardiac arrest in a young life.

For more information, visit:

<https://www.kawasakidiseaseuk.org/parent-guide> (Parent Guide) or
<https://www.kawasakidiseaseuk.org/research> (Latest Research).

For enquiries, email: enquiries@kawasakidiseaseuk.org

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