Kawasaki disease

This information sheet from Great Ormond Street Hospital explains the causes, symptoms and treatment of Kawasaki disease and where to get help.

Kawasaki disease is a disease that causes swelling of the blood vessels of the heart. It causes a high fever and rash.

It’s rare in the UK and only affects around eight in every 100,000 children under the age of five. It is much more common in Japan, where it was first diagnosed, affecting around one in 700 children.

What are the signs and symptoms of Kawasaki disease?

The symptoms are suggestive of an infection but the fever tends to last for more than five days. It is not contagious.

Initial signs can include:

■ feeling unwell
■ fever (high temperature) over 38°C
■ swollen lymph nodes (glands in the neck)
■ rash (especially on the chest)
■ palms of the hands and soles of the feet turn bright red, become puffy and the skin can peel
■ redness on the insides of the eyelids, lips tongue and inside the mouth.

For some children, the heart can be affected too. Around 20 to 40 per cent of children with Kawasaki disease develop problems in the blood vessels in the heart, which may lead to a bulge developing in the wall of a heart blood vessel (coronary aneurysm). This can lead to symptoms like breathlessness and chest pain.

What causes Kawasaki disease?

Doctors do not yet know exactly what causes Kawasaki disease. It is probably due to a combination of factors.

Some children may be genetically predisposed to the condition, and environmental factors such as infections, and the way a child’s body responds to that infection, could play a part too.

Doctors do know that children under the age of five are most often affected, and it’s more common in boys than girls.
How is Kawasaki disease normally diagnosed?
In most cases, doctors can diagnose Kawasaki disease through the distinctive symptoms.
Children usually need a number of tests to find out whether the condition is affecting other organs of the body, in particular the heart.

How is Kawasaki disease normally treated?
A child with Kawasaki disease is usually treated in hospital with high doses of a strong medication called gamma globulin given directly into a vein through a drip.
If this is given early enough in the course of the disease, it can reduce the chance of future heart problems.
A child may also be given aspirin, to be taken by mouth, which reduces the chance of blood clots developing.

What happens next?
Long-term follow-up treatment is usual to check how the heart is working and catch any problems that may occur early.
Children who do not have any heart problems usually recover fully. For children whose heart has been affected, the outlook varies from child to child depending on the extent of damage sustained.
A second attack of the disease is rare.

Further help and advice
Talk to the child's doctor or health visitor. Contact the Kawasaki Support Group for advice and support:
Kawasaki Support Group
Tel: 02476 612178
Web: www.kssg.org.uk

Notes

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