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FACT SHEET

Kawasaki (disease) Syndrome

Kawasaki Syndrome (KS) is an acute febrile illness that usually occurs in young children (under five years of age). The high spiking fever lasts five or more days which does not respond to antibiotics. With the fever a rash develops and swelling of the hands and feet, irritation and redness of the whites of the eyes, swollen lymph nodes in the neck, inflammation inside the mouth, on the tongue (strawberry tongue) cracked lips, and irritation in the throat. It occurs worldwide with more cases happening in the winter and spring. <http://www.cdc.gov/kawasaki/about.html>

Cause: Its cause is unknown but thought to be an unusual reaction to a germ. With early recognition, children can fully recover within a few days; if untreated, it could lead serious complications involving the heart muscle called coronary artery aneurysms (ballooning out of blood vessels in the heart).

Occurrence: KS occurs in 19 out of every 100,000 kids in the United States. It is most common among infants and children; those of Japanese and Korean descent are more at risk, but the illness can affect all ethnic groups. KS is not preventable and little is known about how it is spread although it does not appear to spread from person to person. Reoccurrences are rare. You can help your child by learning the typical symptoms.

Symptoms: Usually there are **three** phases:

1st phase: lasts up to 2 weeks with a constant fever of 104 F continuing for at least 5 days. The other symptoms included are:

- severe redness in the eyes
- a rash on the child's stomach, chest, and genitals
- red, dry, cracked lips
- swollen tongue with a white coating and big red bumps "strawberry tongue"
- sore, irritated throat
- swollen palms of the hands and soles of the feet with a purple-red color
- swollen lymph nodes

2nd phase: beginning within two weeks of fever, the skin on the child's hands and feet may begin peeling. The child may also experience joint pain, vomiting, diarrhea or abdominal pain.

3rd phase: recovery time of fading clinical symptoms

Diagnosis: Clinician diagnosis by ruling out other diseases.

CDC defines a child who is diagnosed with KS as a fever lasting 5 or more days and at least 4 of the following symptoms:

- redness in both eyes
- changes around the lips, tongue, or mouth
- changes in the fingers and toes, such as swelling, discoloration, or peeling
- a rash in the trunk or genital area
- a large swollen lymph node in the neck
- red, swollen palms of hands and soles of feet

If KS is suspected, a doctor may order tests to monitor the child's heart function, which can include an echocardiogram, and other tests of heart function.

Treatment: Should begin as soon as possible, within 10 days of when the fever first begins. Usually, a child is treated with intravenous **gamma globulin**, purified antibodies from blood ingredients that help to fight infection. The child may also be given a high-dose of aspirin to reduce the risk of heart problems.

Complications: If the illness goes untreated (time period can vary, but likely for 10-14 days and sooner in young infants), it can lead to more serious complications that involve the child's heart and blood vessels.