Kawasaki Disease

What is Kawasaki disease?
Kawasaki disease (Cow-a-sa-kee) is an illness that young children, usually younger than 5 years old, can get. It causes swelling and inflammation of the small blood vessels in the body. No one knows what causes it. The illness can last up to a few months.

How is it diagnosed?
We do not have a specific test that can diagnose Kawasaki disease. Symptoms can show up at different times and come and go. The diagnosis is made when doctors see a few or all of these symptoms in a child:

• Fever that lasts for at least 4 to 5 days
• Red, blood-shot eyes called conjunctivitis (kon-junk-ti-vee-tis)
• Swollen lymph nodes of the neck and armpits called lymphadenopathy (lim-fad-e-nop-a-thee)
• Rash on different or all parts of the body
• Red, cracked lips, very red tongue (strawberry tongue), redness in the mouth and the back of the throat
• Swollen and red hands and feet followed by peeling skin on the fingers and toes
• Blood tests that show that your child has swelling (inflammation)
• Also, children with Kawasaki disease are often very fussy.

It can be hard to diagnose because there are other illnesses that can cause these symptoms. To make sure your child gets the correct diagnosis, doctors and specialists from other areas (such as Rheumatology and Infectious Disease) will be involved in your child’s care.

Can this disease be serious?
Kawasaki disease causes swelling and inflammation of the small blood vessels in the body. This is called vasculitis (vas-cue-li-tis). Sometimes this swelling can affect vessels of the heart. This can be very serious. An ultrasound of the heart (echocardiogram) is used to look for damage to the heart or vessels near the heart. A pediatric heart doctor (cardiologist) will be asked to see your child and assist with the treatment plan.

What is the treatment?
Your child will receive medicines to decrease the swelling in the vessels and to decrease the chance that it will affect the heart. These medicines are aspirin and IVIG (intravenous immunoglobulin).
Aspirin is given to reduce inflammation in the first stages of the illness. As your child improves the dose will be decreased. Aspirin is then continued for 6 to 8 weeks to prevent your child’s blood from making clots. IVIG is an intravenous medicine used to decrease inflammation. It is given slowly through an IV into a vein over 12 hours. It is usually given just one time.

Before your child can leave the hospital, the medical team will check that all these things have been done:

1. Your child was observed for 36 hours after IVIG infusion was finished.
2. Your child has had no fever for at least 36 hours after the infusion is finished.
3. Symptoms are improving and overall your child’s condition is improved.
4. Echocardiogram and electrocardiogram were done.
5. Cardiologist saw your child and made recommendations to the medical team.
6. Your child’s community doctor was contacted and discharge instructions and follow-up plans have been faxed to the doctor’s office.
7. Your child has a confirmed appointment with their community doctor within 48 hours of leaving the hospital.
8. Nursing makes sure you know how to check your child’s temperature.
9. Cardiology follow-up appointment is scheduled within 2 weeks.

**What follow-up does my child need?**

Your child must be followed carefully for 6 to 8 weeks after leaving the hospital. It is very important to keep the follow-up appointments with your child’s primary doctor and with the heart doctor in the Kawasaki Disease Clinic. For more information, see the handout “Kawasaki Disease Clinic” www.seattlechildrens.org/pdf/PE1875.pdf.

At the 6 to 8-week follow-up appointment the heart doctor will talk with you about any further follow-up needs.

**Frequently asked questions (FAQs) about Kawasaki disease**

**How serious is Kawasaki disease?**

We know the disease may sound very scary. Your child will appear very ill, have a rash, and be fussy. The heart complications occur in about 20% of untreated children. Most children recover without any problems when treated with aspirin and IVIG. However, some children do not respond to IVIG and need further treatment.

**How long does this illness last?**

It may take a few weeks for your child to start to feel better and about 6 to 8 weeks for your child to fully recover from the illness. It is normal for your child to be irritable and anxious for 2 to 3 weeks after going home from the hospital.
Your child’s appetite might take a long time to return to normal. Frequently, the skin on their hands and feet will peel. The peeling is a normal part of recovering from Kawasaki disease. Their skin will return to normal. Some children also show skin sensitivity and skin peeling on other areas of their body. Lotion or moisturizers may help as the peeling heals.

Is my child contagious?

No, Kawasaki disease cannot be spread from person to person.

Can I give my child ibuprofen?

No, do not give your child ibuprofen (Advil or Motrin) while they are taking aspirin for Kawasaki disease. It can block the aspirin from working. For low-grade fever or pain, you can give your child acetaminophen (Tylenol). Use this medicine only if recommend by your child’s healthcare provider. Check with the healthcare provider first before giving any type of medicine to your child.

Is aspirin safe for my child? What about Reye Syndrome?

No one has found an association between Reye Syndrome and aspirin as used in the treatment of Kawasaki disease. Aspirin was associated with Reye Syndrome in the 1970’s and 1980’s when it was used in extremely high doses to treat viral illnesses, like the flu and chickenpox. Use aspirin only if recommend by your child’s healthcare provider. Check with the healthcare provider first before giving any type of medicine to your child.

Research

 Doctors at Seattle Children’s Hospital are doing research to better diagnose and treat Kawasaki disease. They may contact you regarding this research. Participation in research is voluntary. Your child will receive the same quality care whether or not you participate. For more information, visit: www.seattlechildrens.org/research/integrative-brain-research/our-labs/portman-research-group/kawasaki-disease-program/

When should I call the doctor?

Call your child’s heart doctor if your child has a fever within the first 3 weeks after they go home from the hospital. Take your child’s temperature if they feel warm and alert the heart doctor if it goes above 100.5F (38C). For low-grade fever, you can give acetaminophen (Tylenol). Do not give ibuprofen.