

Kawasaki Disease

Kawasaki (Kah-wah-SOCK-ee) Disease is named after Dr. Kawasaki, a Japanese doctor who first described it. It is an illness that begins suddenly and usually affects infants and young children. The disease can cause inflamed blood vessels, which may include the heart. Inflammation (swelling) can lead to clot formation and decreased blood flow. It's not known what causes the disease or if it can be spread to others. With early treatment, complications of Kawasaki Disease may be prevented. Kawasaki disease is curable. There is a chance that children can develop a form of heart disease.

Symptoms

The first sign is a high fever (over 101°F, and often as high as 104°F) that lasts 5 or more days if not treated. Within 5 days these signs may be seen:

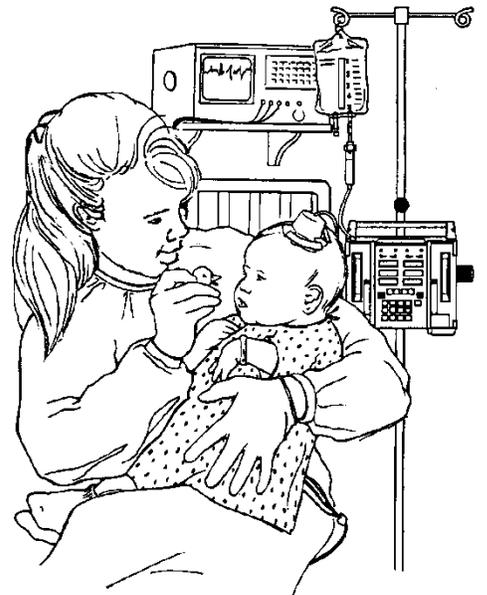
- The hands and feet get very red and swollen, especially the palms and the soles. Later, the skin on the hands and feet usually peels.
- The eyes become red and look "bloodshot."
- The inside of the mouth and lips get red. The lips become dry and cracked. The tongue may have a white coating with bright red taste buds. This is called "strawberry tongue."
- A red, splotchy rash appears on the stomach and back and sometimes on the arms and legs.
- Swelling develops in a lymph node on one side of the neck.

The diagnosis of Kawasaki Disease is made when all other illnesses have been ruled out and the child has fever, along with 4 of the other 5 signs of the disease.

What to Expect in the Hospital

Your child will probably have these things while in the hospital:

- **Heart monitor** – so we can keep a close watch on your child's heart activity (Picture 1).
- An **EKG** (a test that records the child's heartbeats) and an **echocardiogram** (a picture of the heart and its chambers). Your child will leave the unit for these tests and will be in the Cardiology Department for about an hour. You may go with your child for these tests.



Picture 1 Your child will probably have a heart monitor and an IV.

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What to Expect in the Hospital, continued

- **Aspirin therapy** – Baby aspirin is given at regular times, day and night. Aspirin helps control fever and inflammation and it keeps blood cells from clumping. The dose of aspirin will start out high and be decreased after a few days, but it may be continued for a long time. (Usually, children should not be given aspirin, but in this case, it is needed and helpful).
- An **IV** (intravenous) - Fluids will be given through an IV because it is hard to drink with cracked, dry lips.
- **Gamma globulin** (also called **IVIg**) is a medicine given through the IV over several hours. This medicine, along with the aspirin, may help prevent heart problems.
- The nurse will check your child's vital signs often while he is getting this medicine.
- Your child will have to stay in bed while in the hospital. When his doctor feels your child is ready, he will be allowed to get up to eat meals and to walk to the bathroom. Other activity will be limited to quiet play. He may not be able to do some of the things other children on the unit are doing. Your nurse may arrange with the child life specialist for special toys and activities.

After You Go Home

Most children will resume normal play activity after they go home. What a child can do depends on the condition of the child's heart. Your doctor will tell you how active your child may be after going home.

Medicine at Home

- Give the aspirin as ordered by your child's doctor. Problems with aspirin (such as upset stomach or a burning feeling in the stomach) can be prevented by giving aspirin with food or a glass of milk. If a child is getting too much aspirin, he may complain of ringing in the ears, dizziness and headache. Call your child's doctor if you notice any of these signs.
- Do not give your child any other medicines without first checking with your child's doctor.
- Make sure your child gets enough fluids (at least 3 glasses a day).

When to Call the Doctor

Call your child's doctor if you notice:

- Blood in the stools (bowel movements). This blood may be bright red or dark black and sticky.
- Signs of too much aspirin:
 - Ringing in the ears – Nausea and vomiting more than once
 - Dizziness – Headache
 - Fast breathing

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When to Call the Doctor, continued

- Your child does not "seem like himself." (If he seems very tired and doesn't have enough energy to play, especially after the fever has gone away.)
- The fever or rash comes back.
- If your child, while taking aspirin, has influenza ("flu") or chickenpox.

Follow-Up Appointments

- Your child will need to see the doctor on a regular basis for the first few months. He will be examined to make sure there are no problems. Blood tests will be done during these visits.
- In about one month your child will have another echocardiogram and an appointment with the cardiologist (heart doctor).

If you have any questions, be sure to ask your child's doctor or nurse, or call _____.