

Kawasaki Disease

- **Multisystem acute febrile vasculitic syndrome of presumably infectious origin**
- **Affects predominantly infants and young children**
- **Diagnosis is based on characteristic clinical features**

Diagnosis Criteria

EPIDEMIOLOGIC CASE DEFINITION (CLASSIC CLINICAL CRITERIA)*

★ Fever persisting at least 5 days[†]

Presence of at least 4 principal features:

★ Changes in extremities:

Acute: Erythema of palms, soles; edema of hands, feet

Subacute: Periungual peeling of fingers, toes in weeks 2 and 3

★ Polymorphous exanthem

★ Bilateral bulbar conjunctival injection without exudate

★ Changes in lips and oral cavity: Erythema, lip cracking, strawberry tongue, diffuse injection of oral and pharyngeal mucosa

★ Cervical lymphadenopathy (>1.5 cm diameter), usually unilateral

Exclusion of other diseases with similar findings[‡]

Acute phase



Subacute phase



Differential diagnosis

★ VIRAL INFECTIONS

- Adenovirus
 - Enterovirus
 - Measles
 - Epstein-Barr virus
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★ BACTERIAL INFECTIONS

- Scarlet fever
 - Rocky Mountain spotted fever
 - Leptospirosis
 - Bacterial cervical lymphadenitis
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★ RHEUMATOLOGIC DISEASE

- Systemic-onset juvenile idiopathic arthritis
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★ OTHER

- Toxic shock syndrome
- Staphylococcal scalded skin syndrome
- Drug hypersensitivity reactions
- Stevens-Johnson syndrome