

Treatment options of resistant forms of Kawasaki disease, our experience

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Intruduction: Kawasaki syndrome is an acute vasculitis characterized by fever, bilateral non purulent conjunctivitis, erythema of the mouth, rash and cervical lymphadenopathy. In 15 to 20% of untreated children, ectasia or coronary artery aneurysms may develop. The most difficult complications are ischemic heart disease and sudden cardiac death.

Objective: The aim of this study is to describe clinical manifestations, laboratory investigations, therapeutic approach, complications and outcome in children with Kawasaki syndrome. Medical records of all children with Kawasaki syndrome during 8 years period (between 2009 and 2017) at the Pediatric Clinic Banja Luka were retrospectively reviewed. 20 children, 12 girls and 8 boys were analyzed. The youngest child was 4 months old, and the oldest child was 7 years old. The most common clinical manifestations were: fever 20/20(100%), rash 15/20 (75%), conjunctivitis 12/20 (60%), lips and buccal mucosa hyperaemia 13/20(65%), gastrointestinal 9/20(45%), cervical lymphadenopathy 8/20 (40%) and renal involvement 8/20 (40%). In 8/20 (40%) of patients had coronary involvement. Coronary aneurysm occurred in 5/20(25%) of children. 15/20 (75%) of children had elevated parameters of inflammation. All 20 children were treated with i.v. immunoglobulins (IG) with acetyl salicylic acid. In 2 children, a second dose of IG and methylprednisolone were administered. Two patients required administration of Anti-TNF alpha monoclonal antibodies-infliximab, given as a single dose, with favourable outcome. During follow-up period 4 children (20%) had persistent aneurysmal enlargement of the coronary arteries. During the study period no death was reported.

Conclusion: In eight children 8/20 (40%) who developed coronary involvement, the therapy was started late, after the seventh day of the onset of the disease. The most complicated patient was youngest 4 months old infant who received therapy at the latest from all patients (Day 13). There was no significant difference in clinical manifestations, laboratory results, therapeutic approach and outcome in children with Kawasaki Syndrome compared to other studies.