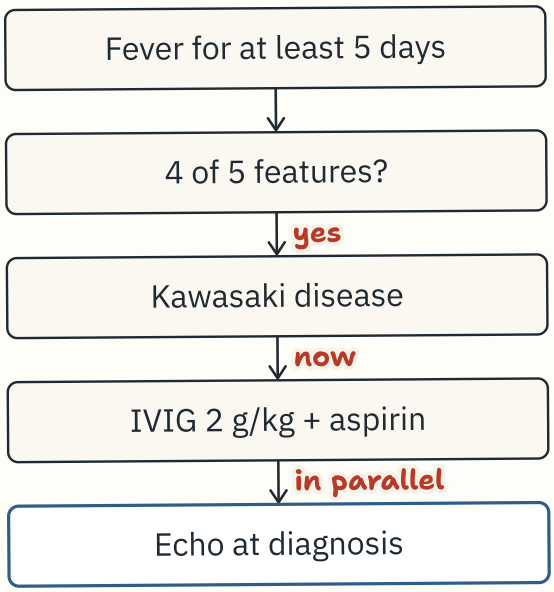
# Kawasaki disease in 3 steps

Criteria, coronary danger, IVIG and aspirin




## Step by step

1. Fever for at least 5 days plus at least 4 of 5 features
2. Echocardiography at diagnosis, then 1–2 and 4–6 weeks after treatment
3. IVIG 2 g/kg, ideally within 10 days of fever onset
4. Aspirin: higher dose, then low dose (antiplatelet)

| Feature | What is seen |
|---|---|
| Eyes | Conjunctival redness, no exudate |
| Mouth | Red cracked lips, strawberry tongue |
| Rash | Polymorphous, on the trunk |
| Hands and feet | Red, swollen; later peel |
| Neck | Cervical node at least 1.5 cm |

Fever for at least 5 days plus 4 of 5 features

### Rule of thumb

**Fever 5 days + 4 of 5 features**

**Treat now; do not wait for the echo**

## Exam traps

- Aspirin alone has no proven effect on aneurysm formation: IVIG comes first.
- Treatment should not wait for the echocardiogram.
- Younger infants may have incomplete Kawasaki disease with a high aneurysm risk.

Kawasaki disease criteria, IVIG and aspirin

Video, written lesson, practice question and sources: medservatory.com/usmle-step-2-ck/paediatrics/kawasaki-disease-criteria-ivig-aspirin-coronary-aneurysm

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