KAWASAKI DISEASE IN INFANTS LESS THAN ONE YEAR OF AGE: AN ITALIAN COHORT

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OBJECTIVES

1. To analyze clinical and laboratory features of KD among an Italian cohort of infants below 12 months.
2. To confirm whether infants with incomplete KD have a more severe disease and a greater predilection for cardiac involvement.

METHODS

- Retrospective chart review of children diagnosed with KD between January 2008 and December 2017 admitted to Meyer Children Hospital in Florence, Italy.
- Data were analyzed by Epi Info Statistical Software version 7.1.5.2.
- Inclusion criteria: disease onset below 12 months of age according to AHA guidelines (including incomplete and atypical Kawasaki disease).

Patients cohort

Clinical Features

RESULTS

- 113 patients with KD of whom 32 infants below 12 months of age (28,3%) . (M:F= 20:12).
- Mean age of presentation was $5,7 \pm 2,7$ months. 19 patients (59,4%) were less than 6 months of whom 8/32 were below 3 months of age (25%).
- Mucosal changes were present in 13 patients (40,6%); extremity changes in 18 (56,2 %); rash in 25 (78,1 %); conjunctival injection in 26 (81,2%) and cervical lymphadenopathy in 7 (21,8 %).
- 22 patients (68,7%) had incomplete KD.
- Heart involvement was present in 19 (59,4%) patients of whom 13 (59%) had incomplete form.
- Coronary artery abnormalities (CAA) were detected in 16/32 (50%) patients of whom 12 had an incomplete form (75%).
- The mean time for diagnosis was 7 days (range 3-22) and it was longer in the incomplete KD (7,6 VS 5,8).
- PCR and platelets values were all higher in complete KD than in incomplete forms, without any significant difference between the two groups.
- ESR was higher in complete forms than in incomplete with a statistical significant difference ($p < 0,01$)

Heart involvement

CONCLUSION:

- Incomplete KD was more commonly found in children younger than one year
- Incomplete forms were diagnosed later than the complete ones
- Infants with incomplete KD have a more severe disease and a greater predilection for cardiac involvement.

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