



**ThinkAskLearn**  
Health Professional Education

## Classic Paediatric Rashes

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1

### What is that...

- 48 day old infant presents to Triage by mother
- Has a rash over last week
- S/B GP 4 days ago Dx with Eczema
- O/E irritable child
- Polymorphous rash that covers whole body
- Rash is described as maculopapular, vesicular and pustular


2

### Defintions



3

### Definition



4



5

### More History

- During late pregnancy mother had pruritic rash
- As did 4 year old brother who attends daycare

6



7



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10

### Scabies in Kids and Adults

- Classic clinical features include
  - intense itch
  - presence of characteristic skin burrows, which can be linear or 's' shaped,
  - papules, nodules, vesicles and pustules
  - lesions are usually seen in the finger webs and flexural regions of the wrists, elbows, axillae and perineal regions in older children and adults
  - nodules on the penis and scrotum are pathognomonic

11

### However in Neonates

- Neonates do not itch
- Usually extensive rashes
- Irritability,
- Poor feeding and failure to thrive
- Lesions spread rapidly
  - involve the face, scalp, palms and soles
- Vesicles are common, leading to early pustulation, crusting and scaling

12

### Back to Triage

- A well 7 year old child has had these lesions on his legs for seven days
- His 4 year old sister has the same skin eruption



13



14

### Impetigo – School Sores

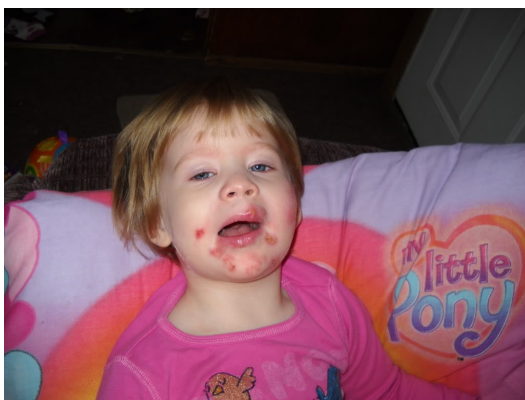
- Reddened sores or blisters
  - break open, ooze, and develop a yellow-brown raised crust, can occur anywhere esp mouth, face
- High contagious bacterial infections
  - *Staphylococcus* or *Streptococcus* bacteria (AB's)
- Incubation period
  - 1-10 days (usually 3 days)
- Good hand hygiene (Staff and patient)



15



16



17



18

## Chicken Pox



19

## Chicken Pox

- Common/Highly infectious. It is most common (often epidemic) in late winter and spring
- Varicella zoster virus
- 1st sign itchy rash which spreads to scalp, axilla, back
- Mild fever/cough may precede rash
- Small pink spots which become little water blisters and then become yellow, oozy and finally dry as crusts.



20

## Chicken Pox - Highly Infectious

- Usually from 2 days before the rash appears and until spots are dry and crusted (usually 5 days after the spots first appear)
- The illness may develop 10 to 21 days after contact with an infected person
- The disease is very easily spread, by direct contact and by droplet spread from the nose and throat
- Those in contact with chickenpox who have not had it before are likely to get the disease



21

## Chicken Pox Management

- Isolation
- Uncomplicated and resolves completely
- Symptomatic Treatment
  - Antipyretics
  - Analgesia
- Pock marks - to pick or not to pick
- Pneumonitis- occ in adults but rare in children
- Observe for bacterial skin infected- infected lesions



22

## Chicken Pox



Secondary infection



23

## Meningococcal Infections

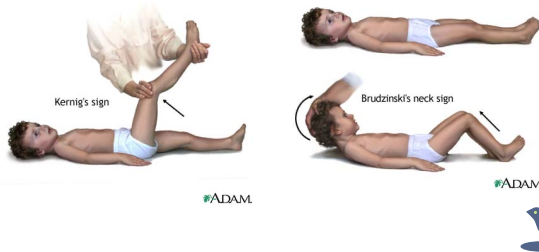
- Bacterial meningitis - rapid and fatal illness
- Headache, fever, meningism (headache, neck ache and back ache, Kernig's sign, stiff neck, photophobia, Brudzinski sign) and mental obtundation- often absent or diminished in very young.
- Haemorrhagic Rash - does not blanch under pressure
- Do not delay treatment



24



## Meningococcal Infections



25

## Meningococcal Infections



26

## Meningococcal Infections



27

## Meningococcal Infections



28

## Meningococcal Infections



29

## Meningococcal Infections

- Management
  - IV Abs (Quality indicator - IV AB's within 30 min of arrival)
  - Esp fever, vomiting, drowsiness Petechial rash
  - LP
  - Path
  - Isolate

30

## Measles



31

## Measles

- Now very uncommon due to immunizations
- Public health emergency
- Incubation period is 10 days (7-18) from exposure to onset of rash
- Communicable spread - about 5 days before rash and 4 days after rash appears



32

## Measles

- Highly infective virus that effects the resp tract
- Airborne virus spread by droplet, or direct contact with nasal secretions
- Flu like symptoms, fever, cough, runny nose, conjunctivitis worsening over 3 days
- Small white spots on a red base on inside of cheek known as Koplick spot's



33

## Measles



Dr. Henry Koplik  
1858- 1927



34



35

## Measles

- A red blotchy rash develops between the 3rd and 7th day of illness
- Usually develops in hairline
- Takes 1-2 days to spread over whole body.
- Rash last 6 days
- Illness last 10 days
- Cough usually last thing to disappear



36

## Complications of Measles

- 4% - pneumonia
- 2.5% - middle ear infection
- 1 in 2000 will contract encephalitis
- For every 10 kids with encephalitis 1 will die and 4 will have permanent brain injury



37

## Mumps

- Caused by a mixo virus
- The saliva is infectious six days prior to the onset of swelling of the salivary glands.
- The individual may be infectious for up to two weeks after the onset of swelling of the glands.
- Fever
- Swollen parotid glands - Difficulty swallowing
- Symptomatic treatment



38

## Mumps



39



40

## Rubella



41

## Rubella



42

## Rubella - German measles

- Incubation period from exposure to rash is 14-21 days
  - Mild fever and headache
  - Swollen, tender lymph nodes at the base of the skull, the back of the neck, and behind the ears
  - Aching joints
  - Runny nose
  - Red, runny eyes
  - A pink rash on the face, body, arms and legs (may appear before or after other symptoms occur) short lasting 3 days



43

## Rubella

- Symptoms of Congenital Rubella syndrome
  - Deafness
  - Heart defects
  - Cataracts and other eye defects
  - Abnormally small head
  - Mental retardation



44

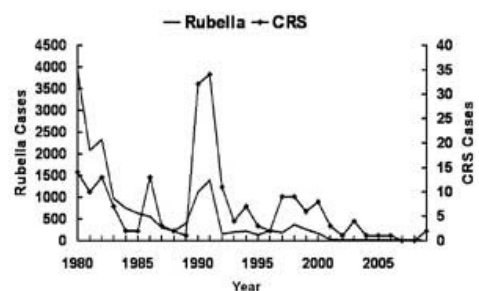
## Rubella Complications

- 9 out of 10 pregnancies (1st 8-10 weeks) -
  - Damage to unborn fetus (multiple defects common)
- 1 in 5 to 10 (between 10 and 16 weeks)
  - Damage to unborn fetus
- After 16 weeks damage is rare
- Bleeding disorders 1 in 3000
- Encephalitis 1 in 6000



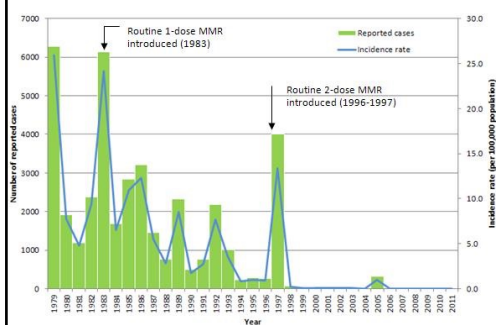
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## Rubella



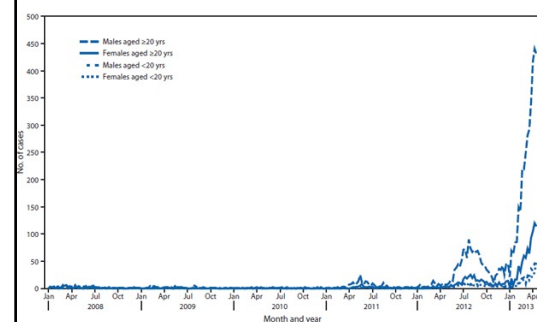
46

## Rubella Cases - Canada



47

## Rubella Cases - Japan



48



Any questions?

