HENOCH-SCHÖNLEIN PURPURA IN CHILDHOOD

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Henoch-Schönlein purpura is the most common vasculitis in children. The process affects small blood vessels of the skin, joints, gastrointestinal tract, kidneys and the central nervous system.

The clinical manifestations in children with Henoch-Schönlein purpura were analyzed. The count of white blood cell, trombocytopenia, CRP, LDH, CPK, titer of antistreptolysin antibody (ASO) were analyzed. Urinalysis and urine culture tests were performed. The values of complements (C3 and C4) and immunoglobulins (IgG and IgM) for viruses HSV, EBV and CMV (ELISA test) were analyzed as. Nasal and throat swabs were examined as well.

We examined 35 children, aged 5 to 17 years. The recorded clinical manifestations were: fever (47.21%), abdominal pain (28.61%), joint pain (25.33%), and muscle pain (18.03%). Changes such as purpura were present on hands (6.5%), forearm (12.3%), lower leg (81.2%), gluteal region (28.13%), and feet (21.35%). We also recorded: leukocytosis (11.37%), trombocytopenia (7.21%), high level of CRP (6.21%) and high level of serum CPK and LDH (7.21%). ASO titer antibody was positive in 18.47% of children.

The majority of children had previous respiratory and urinary tract infection. Most of the children had an infection of viral origin. The prognosis for most children is good, with no pathological kidney damage with proteinuria. A small number of children required the use of corticoid in therapy. Acta Medica Medianae 2015;54(4):32-36.

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