Paediatric rashes factsheet

Terminology

Erythema – red appearance of skin

Petechiae – tiny (<2mm) pinprick dots on skin, non-blanching (a type of purpura)

Ecchymosis – large bruise like appearances on skin, non-blanching (a type of purpura)

Macules – small dots flush to skin

Patches – large sections flush to skin

Papules – small bumps (<1cm)

Nodules – large bumps (>1cm)

Vesicles – small fluid filled sacs (<1cm)

Bulla – large fluid filled sacs (>1cm)

Pustules – vesicular lesions containing pus

Wheal – mild elevation of skin due to oedema, often relates to urticarial process

Confluent – smaller skin lesions all joined together

Lichenification – chronic skin thickening often secondary to chronic rubbing (may be seen in poorly controlled eczema)

Other resources

- https://dermnetnz.org/
- Don't forget the bubbles, Skin Deep
- NICE CKS – chickenpox, measles, Hand foot and mouth disease, impetigo, scarlet fever
- British Association of Dermatologists patient information leaflets - https://www.bad.org.uk/pils
- Notifiable disease website - https://www.gov.uk/guidance/notifiable-diseases-and-how-to-report-them

Condition	Typical presentation	Key points
Measles	- Cough and coryza, conjunctivitis, fever, koplick spots - Macular-papular rash spreading from behind ears	- Highly contagious so wear PPE - Notifiable disease - Infectious until 4 days after start of rash
Chickenpox	- Prodrome of fever and coryza - Discrete macules, papules and vesicles of different ages	- No ibuprofen - Infectious until all lesions scabbed over - Avoid pregnant, neonates, immunocompromised
Hand, foot and mouth	- Erythematous macules and vesicles to palms, soles, mouth and sometimes buttock	- Can attend school/nursery if well enough - Difflam can be useful for mouth lesions - Can get desquamation few weeks later
Non-blanching rash	- Petechiae and/or ecchymosis	- Lots of differential diagnoses, not just meningococcal sepsis - See e-library guideline
Impetigo	- Pustules which change to 'honey crusted lesions'	- Off school for 48hr after starting antibiotics - See NICE CKS for treatment options
Scarlet fever	- Sandpaper like feel to rash - Strawberry tongue	- Off school for 24hr after starting antibiotics - Notifiable disease
Desquamation	- Multiple different causes; consider depth of desquamation and if mucosa also involved	-Consider staphylococcal scalded skin syndrome; TEN; Steven-Johnson syndrome; Kawasaki disease; post-hand foot and mouth