

CORONARY ARTERY DISEASE

Consider Kawasaki disease when assessing myocardial ischemia

In a study involving four hospitals in San Diego, CA, USA, signs of Kawasaki disease were present in 5% of 261 young individuals (aged <40 years) who underwent coronary angiography for suspected myocardial ischemia between July 2005 and June 2009. The investigators recommend that cardiologists become more aware of this potential cause of coronary disease, particularly because affected patients “may benefit from medical and invasive management strategies that differ from those used to treat atherosclerotic coronary artery disease”.

Kawasaki disease is an acute, difficult-to-recognise, pediatric vasculitis that often remains undiagnosed. Indeed, no diagnostic test currently exists. Diagnosis during the acute condition depends on recognition of the clinical syndrome, whereas retrospective diagnosis mainly involves ruling out other potential causes of the clinical features.

Damage to coronary arteries during this acute condition can lead to lesions that differ in composition from those seen in typical atherosclerosis. Additionally, a substantial proportion of individuals with Kawasaki disease develop coronary aneurysms, which can result in substantial thrombus formation in later life.

The incidence of Kawasaki disease seems to be increasing. “As more children with a history of Kawasaki disease reach adulthood, adult cardiologists are likely to see increasing numbers of patients with acute and subacute presentations due to [this condition],” comment the investigators. “Increased awareness ... is more important now than ever before.”

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Original article Daniels, L. B. *et al.* Prevalence of Kawasaki disease in young adults with suspected myocardial ischemia. *Circulation* doi:10.1161/CIRCULATIONAHA.111.082107