

Viral skin infection /Viral Exanthems



Assoc. Prof. Chulapan Engchanil
Pediatric (Infectious disease),
Clinical Pathology, Family-Medicine.
Dept.of Microbiology ,Faculty of
Medicine,
KhonKaen University, Thailand.
Chulapan.engchanil@gmail.com

Outline:

Viral Exanthems

Virology, Clinical sign and Symptoms, LAB diagnosis and treatment

Erythematous maculopapular rash

- Measles
- Rubella
- Roseola Infantum
- Infectious mononucleosis
- Fifth Disease
- Kawasaki syndrome ?

Vesiculopustular rash

- Herpes simplex infection
- Varicella zoster infection
- Hand foot and mouth disease

HPV and Pox virus

Exanthematous fever

- Infection : **Bacteria, Virus**
- Non infection: **drug rash**
 - ชักประวัติการรับประทานยาในช่วง 3 สัปดาห์ก่อนเกิดผื่น
 - หยุดยาคันทันที ผื่นมักหายไปภายใน 24-48 ชั่วโมง

Erythematous maculopapular rash

- Measles
- Rubella
- Exanthem subitem (Roseola Infantum)
- Infectious mononucleosis
- Fifth disease

Vesiculopustular/vesiculopapular rash

- Herpes simplex infection
- Varicella zoster infection

Measles

- RNA virus family **paramyxovirus**
- Transmission: **airborne**
- Pre-school age
- Incubation period: 10-12 d
- Prodromal period: 3-5 d : **3 C***
cough ,coryza, conjunctivitis+ Koplik's spot
- Rashes 2-3 d → desquamation
- Hyperpigmentation ซึ่งเป็นผลจากการมีเลือดออกในหลอดเลือดฝอย จากนั้นจะหลุดลอกเป็นแผ่นบางๆ
- Contagious period: **4 d before and after rashes***
- Severe in malnutrition and Vit A def

Measles



**unvaccinated
child**



**unvaccinated due
to medical reasons**



**missed
booster shot**



**Vitamin A
deficiency**



Measles /Rubeola

(3C)

Cough,

Coryza,

Conjunctivitis

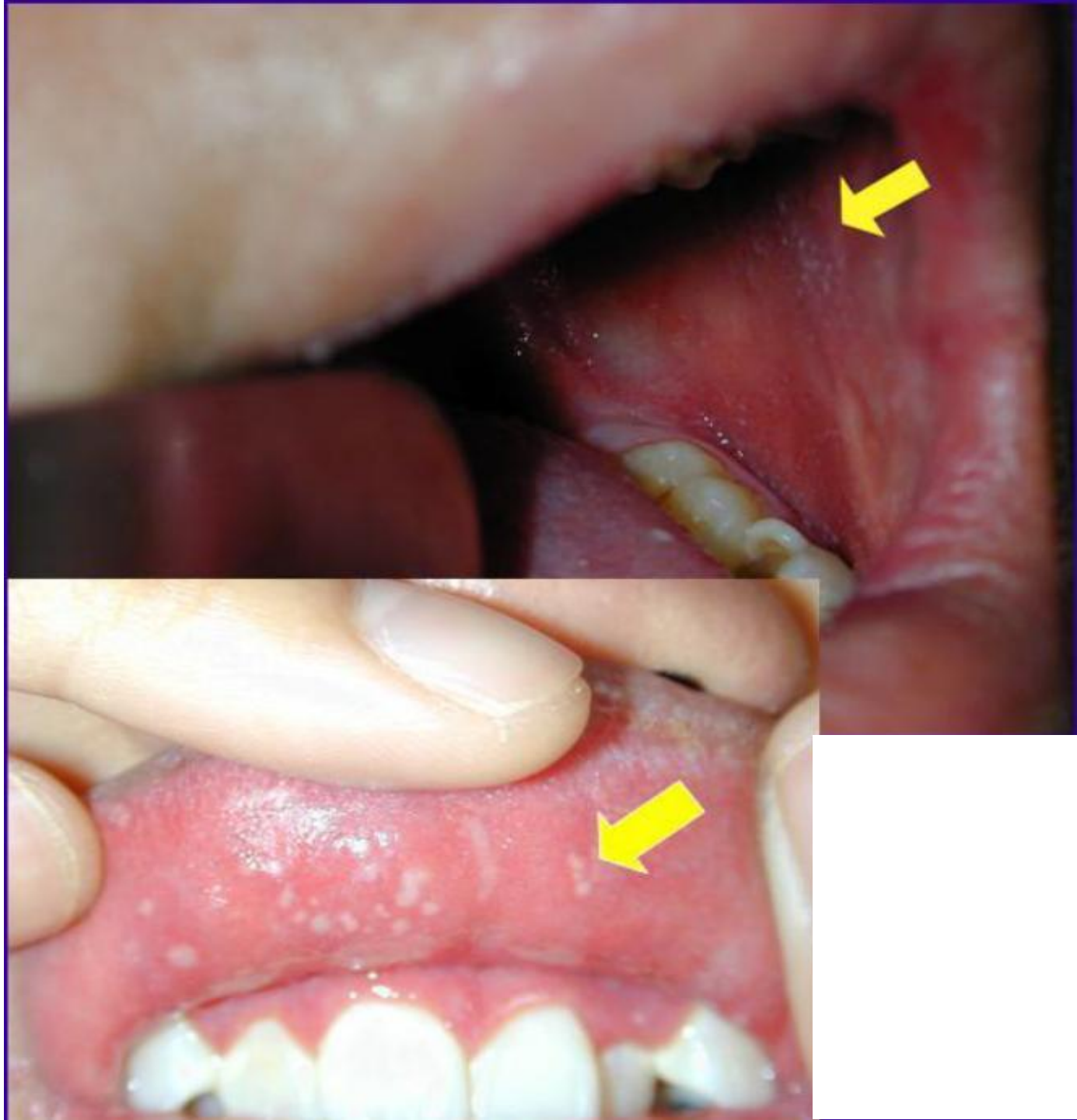
+ Koplik's spots



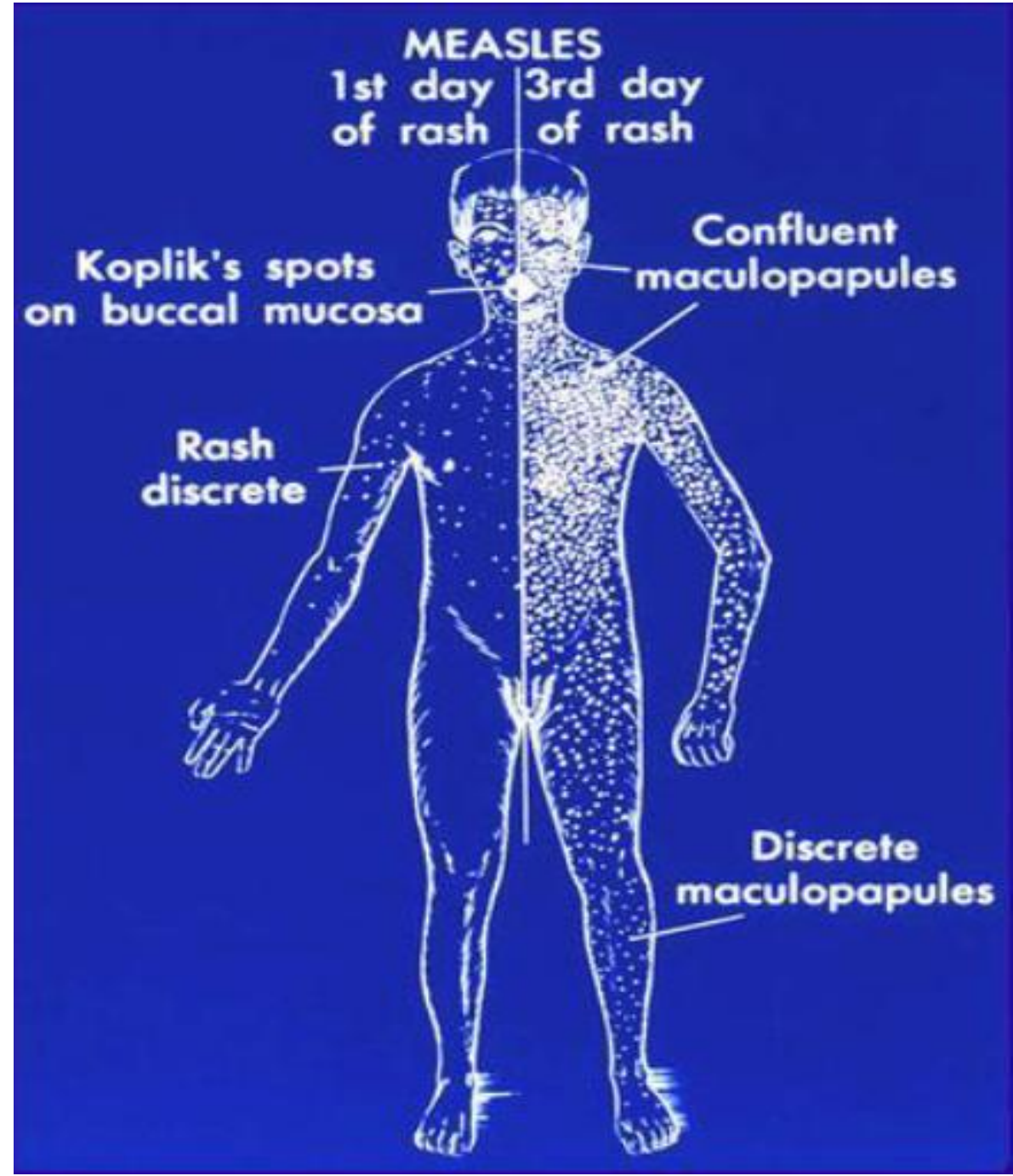
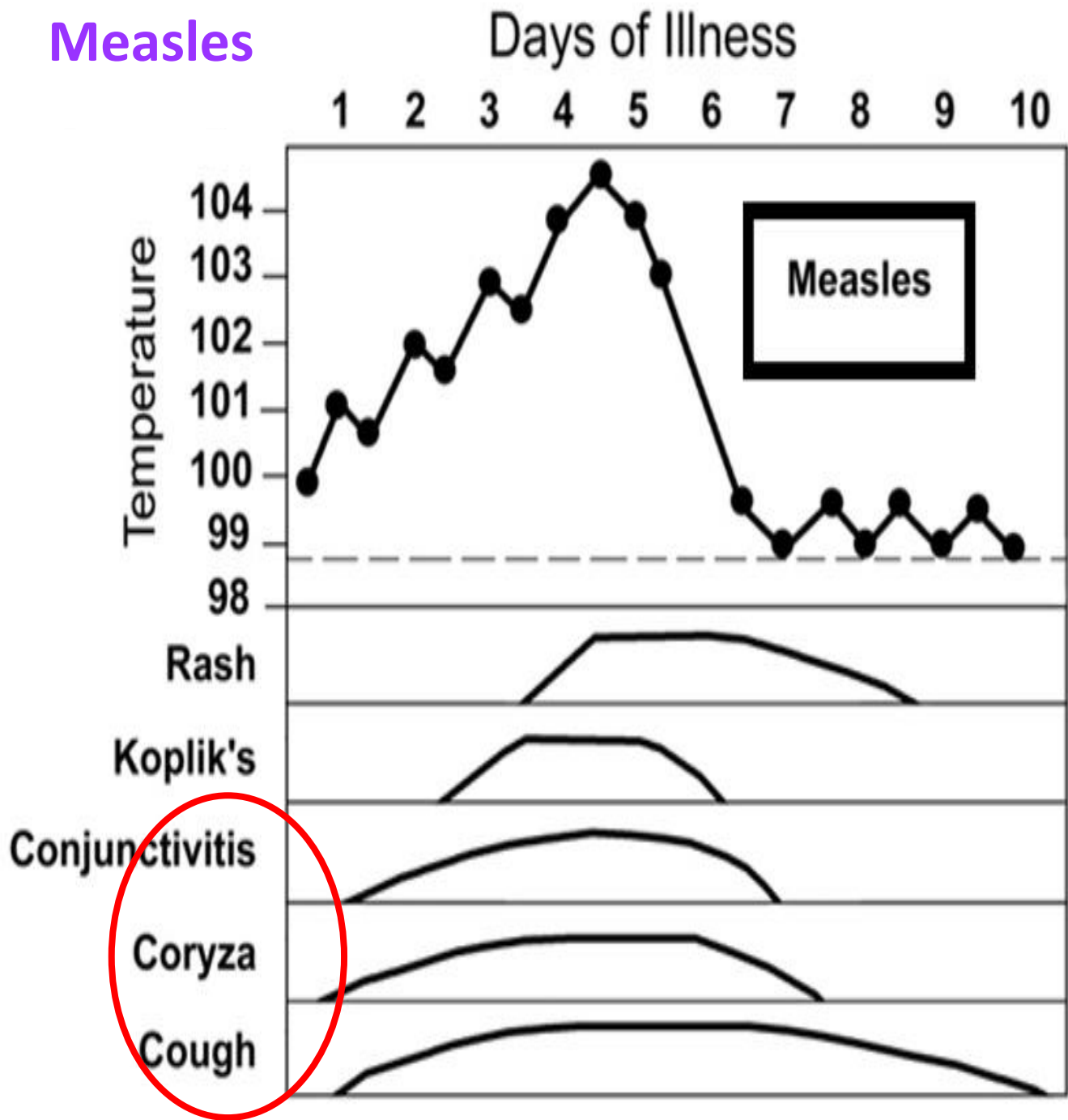
Measles

Koplik's
spots

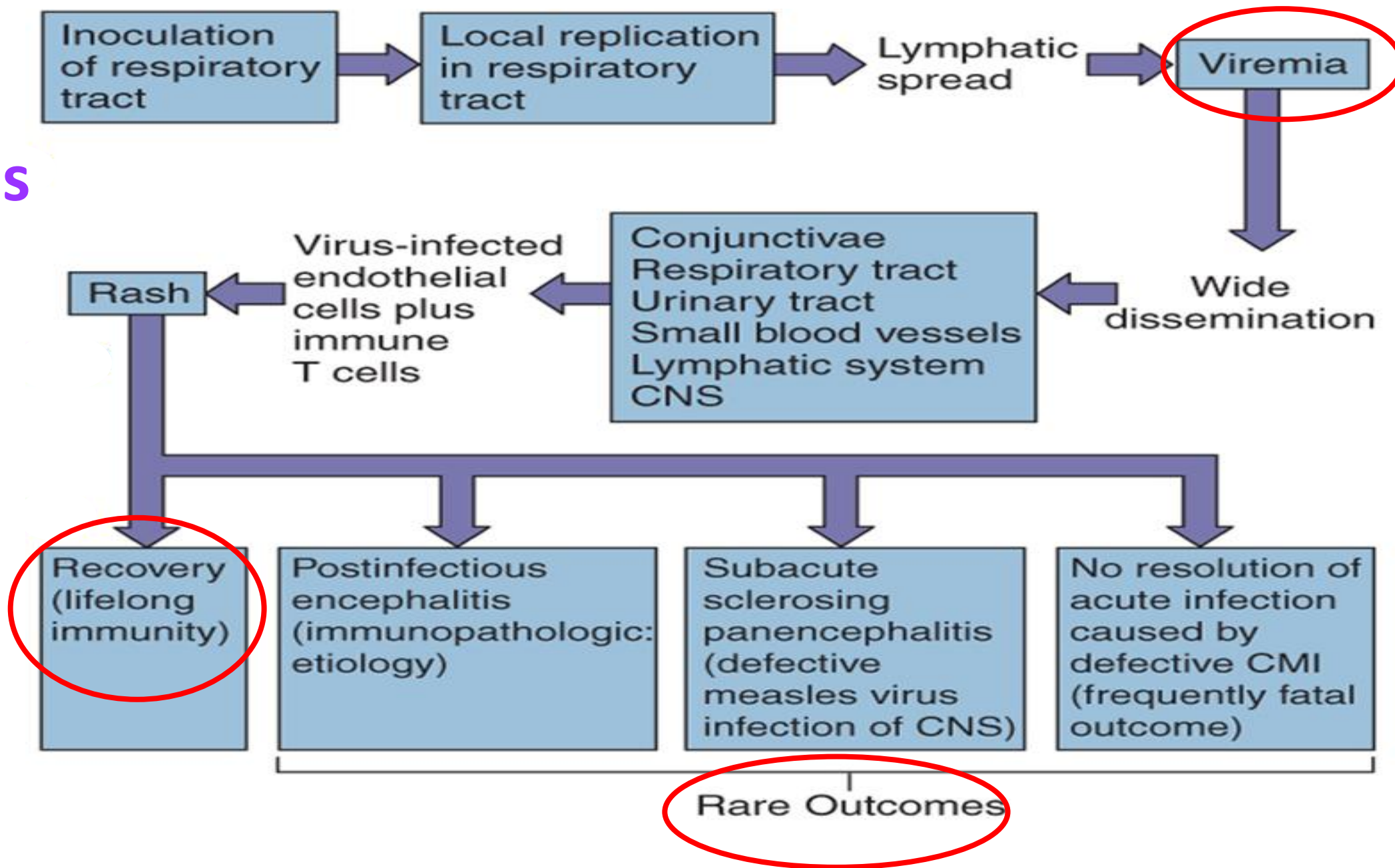
(pathognomonic)



Measles



Measles

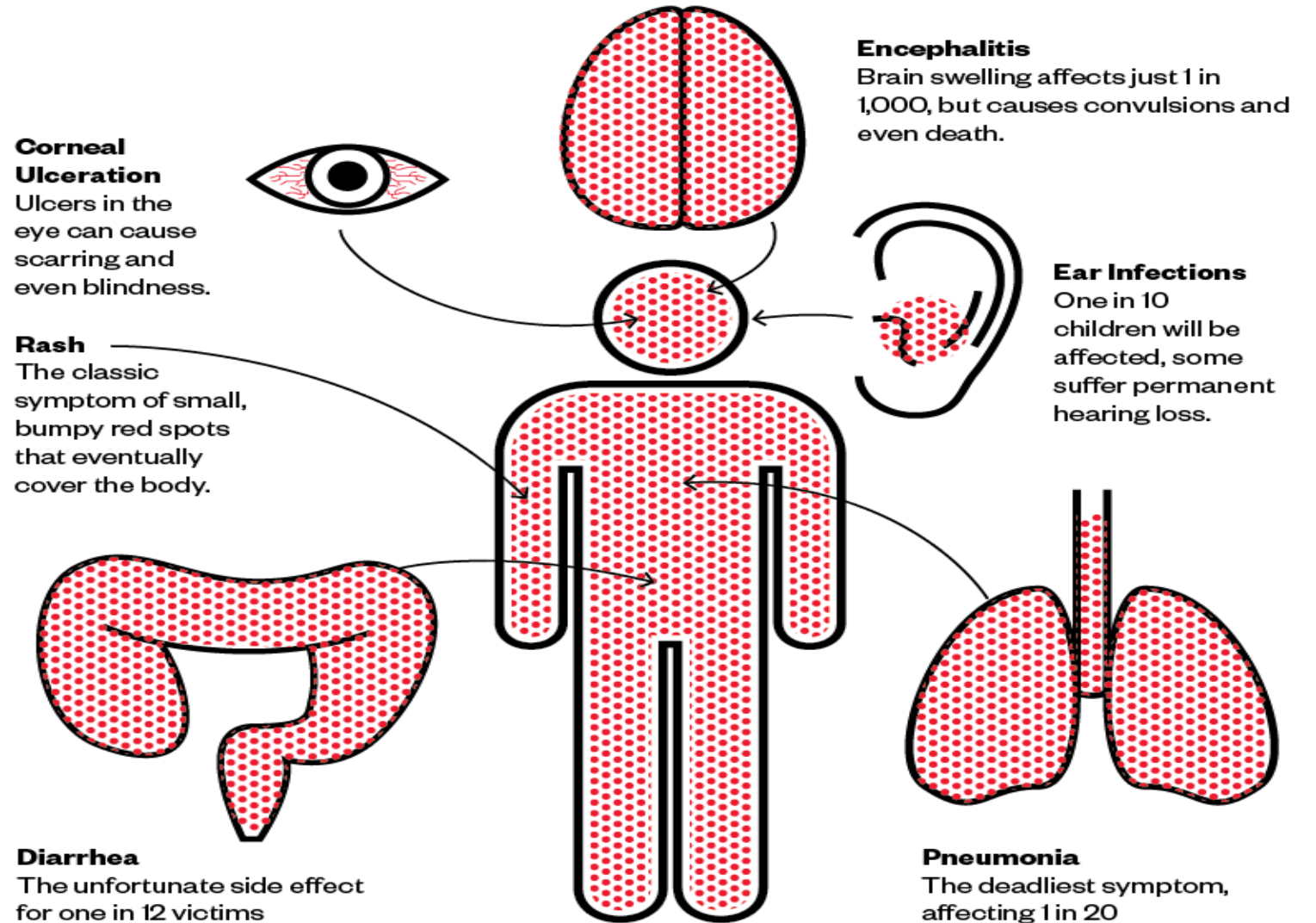


Measles complication

“Epithelial surface destruction and Immune suppression”

- Otitis media,
- Pneumonia,
- mesenteric adenitis,

Dx: Measles IgG, IgM
Tx: Supportive tx



Measles Prevention

- Symptomatic treatment; < 2 ปี ให้ Vit A
- Prevention: MMR vaccine
- Post exposure prophylaxis:
 - Vaccine ภายใน 72 hr
 - คนท้อง/ เด็ก < 1 ปี /immunocompromise, HIV
 - Measle IG : ภายใน 72 ชม-6 วัน
 - IVIG

ในทารกอายุต่ำกว่า 6 เดือน หรือเด็กที่เคยออกหัดแล้ว ไม่ต้องทำอะไร เนื่องจากมีภูมิคุ้มกัน

ผู้ป่วยที่ให้ประวัติออกหัดมาก่อน เป็นหัดจริงหรือไม่

- 1. ถ้าไม่ไอไม่ไข้หัด
- 2. ถ้าเป็นหัดจริง วันที่ผื่นขึ้นจะต้องมีไข้อยู่ ถ้าไข้ลงแล้วไม่ไข้หัด
- 3. เมื่อไข้ลงโรคหัดมักมี **hyperpigmentation** อีกหลายวัน
- 4. เป็นด้วยกัน หลายคนจะช่วยสนับสนุนโรคหัดมากขึ้น
- 5. เป็นไขีก่อนผื่นขึ้น ในโรคหัดมักจะมีผื่นขึ้นประมาณวันที่ 3-4 หลังจากมีไข้
- 6. อายุของผู้ป่วย ถ้าต่ำกว่า 6 เดือนมักไม่ไข้หัด

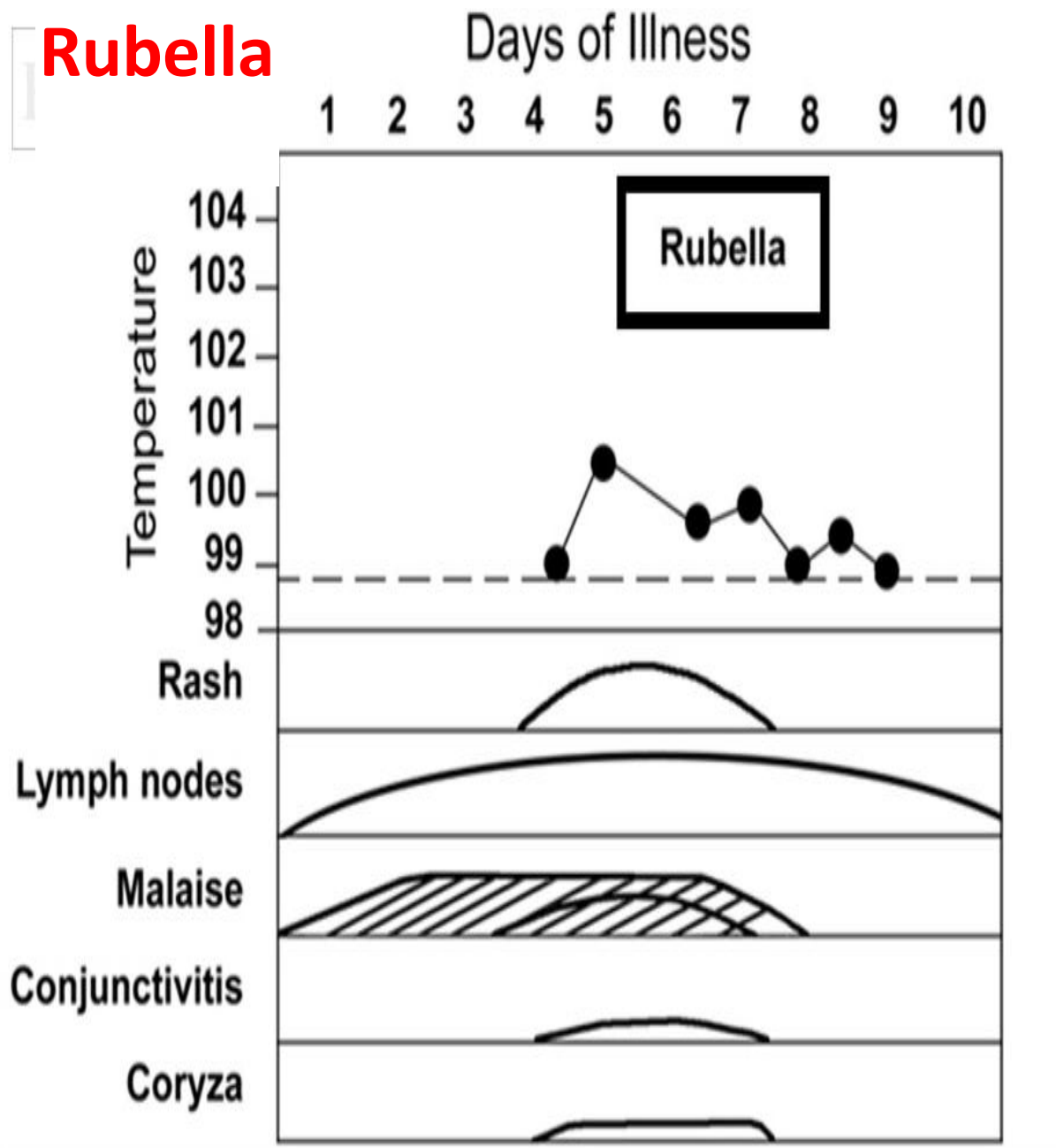
Rubella (German Measles)

- Rubella Virus, Family Togaviridae
 - Teenage
 - Incubation period: 12-23 d
 - Prodromal period: Low grade fever
 - droplet transmission: ระยะติดต่อ 5 วัน ก่อนผื่นขึ้น จนถึง 7 วันหลังผื่นขึ้น
 - Maculopapular rashes with
- “ Retroauricular , posterior cervical, postoccipital lymphadenopathy”

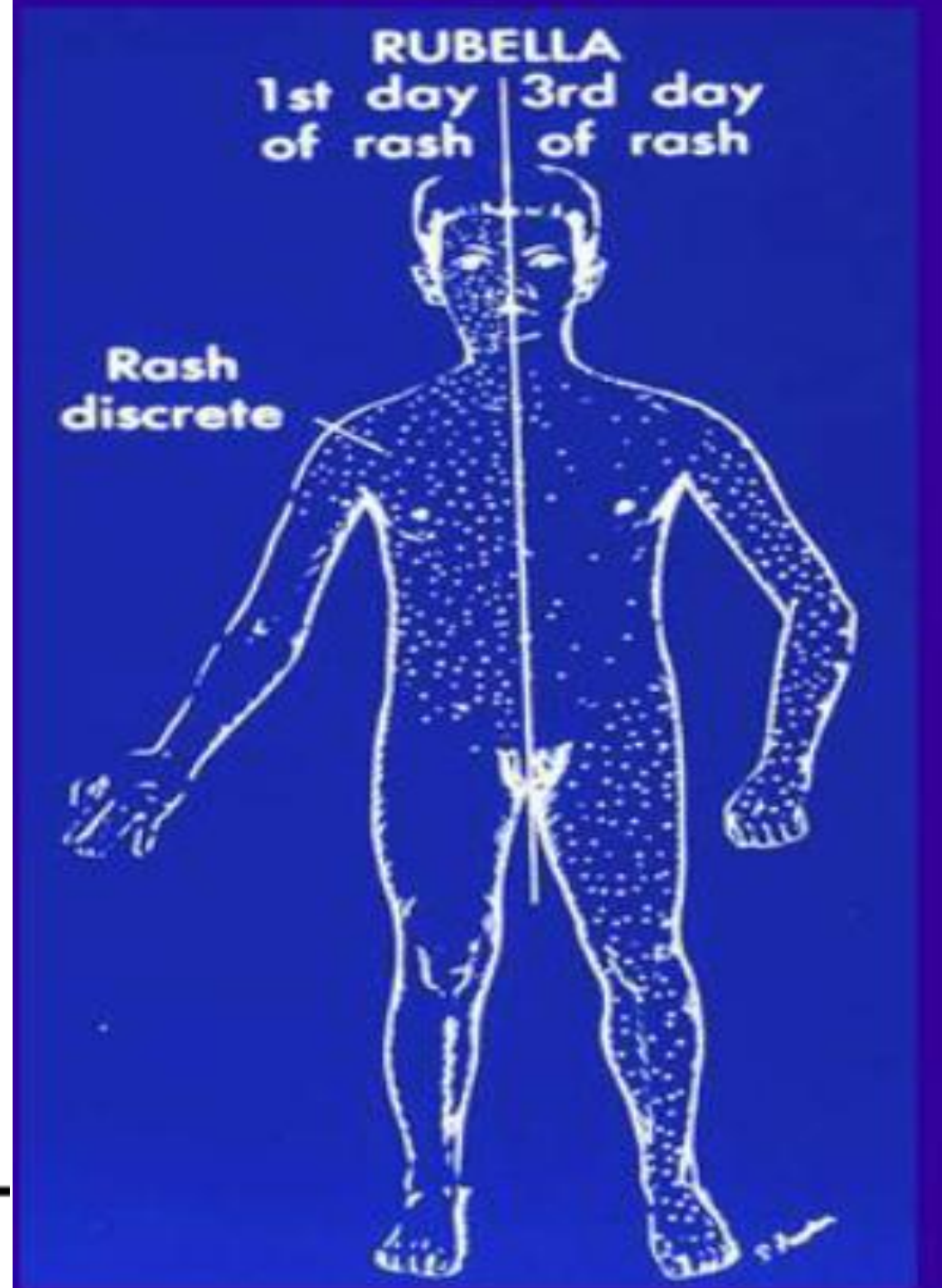
Rubella



Rubella

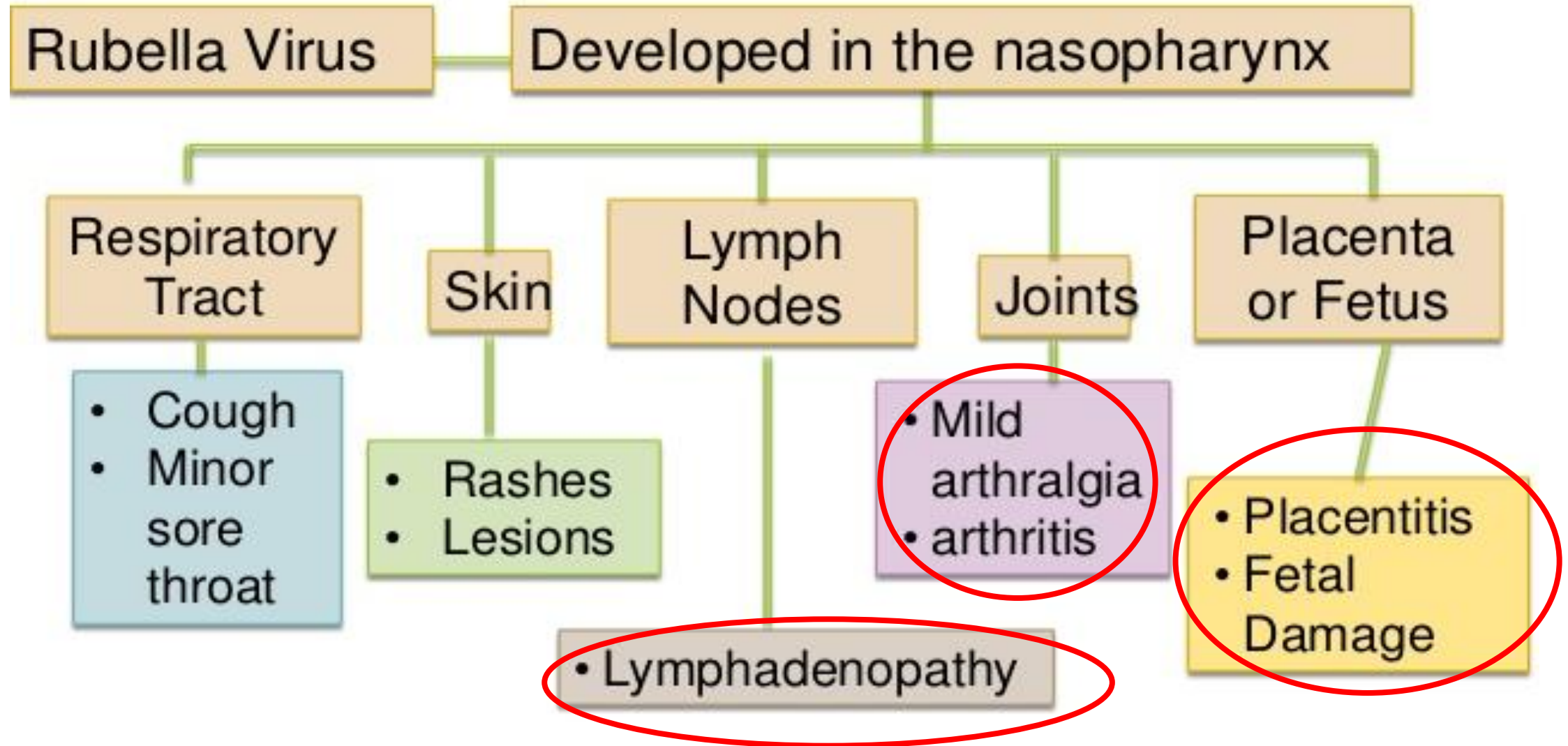


3 days rashes



Rubella

Pathogenesis



Congenital rubella syndrome

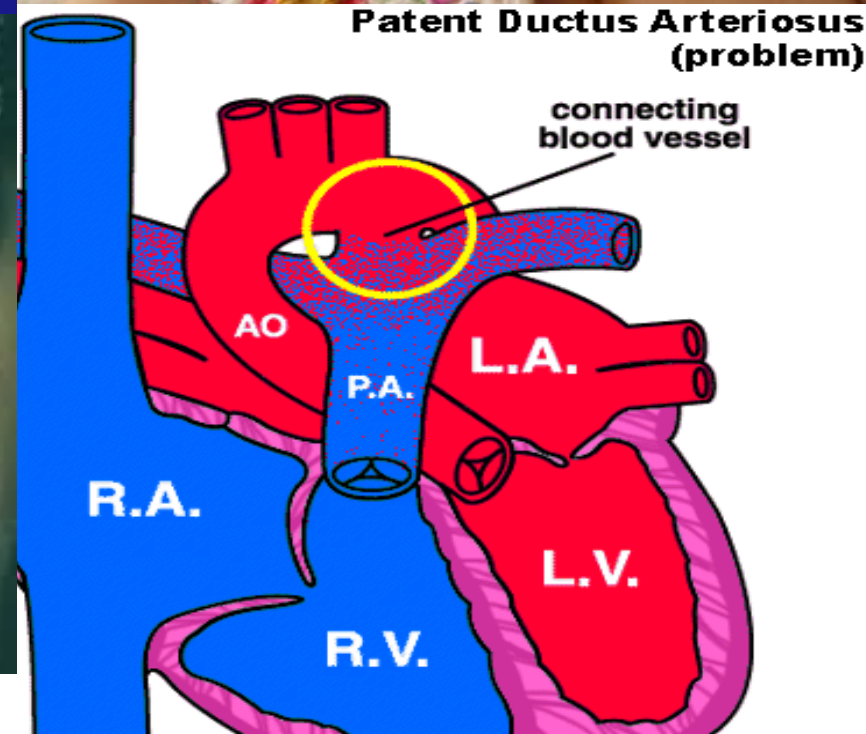
- IUGR (Intra uterine Growth retardation)
 - Cataract, Glaucoma
 - Deafness
 - Cardiac : PDA (patent ductus arteriosus),
PS (pulmonary stenosis)
 - Blueberry Muffin Skin lesion,
 - Mental retardation, microcephaly
 - Bony radiolucency : Celery stalk metaphysis
- “Generalized viral induce progressive Necrotizing Vasculitis”

สามารถตรวจพบเชื้อใน nasopharyngeal secretion และปัสสาวะได้นานถึง 1 ปี

Congenital Rubella



“Generalized
viral induce progressive
Necrotizing Vasculitis”



Blueberry Muffin Skin lesion



Dermal erythropoiesis



Congenital infections
(**rubella**, cytomegalovirus, parvovirus B19),



Congenital Rubella

Celery stalk metaphysis.

Rubella

Complication

- 1. Arthritis: adult female
- 2. Thrombocytopenia

LAB:

- ELISA, PCR

Prevention

MMR vaccine

คนที่ต้อง ถ้าสัมผัสโรค

: ให้ IG ลดอาการ แต่ไม่ลด viremia

: ตรวจ rubella Ab 2 ครั้ง

Roseola infantum

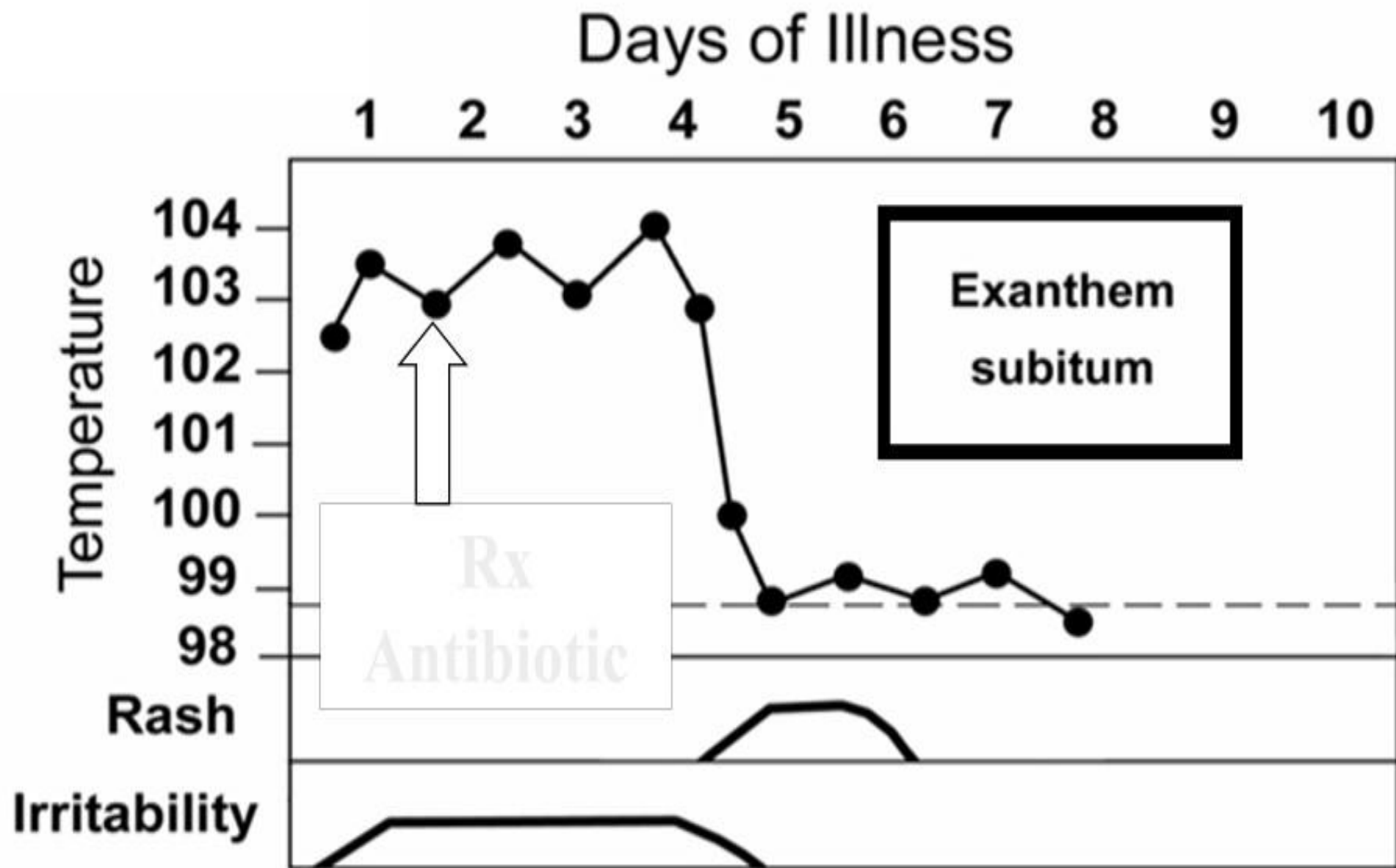


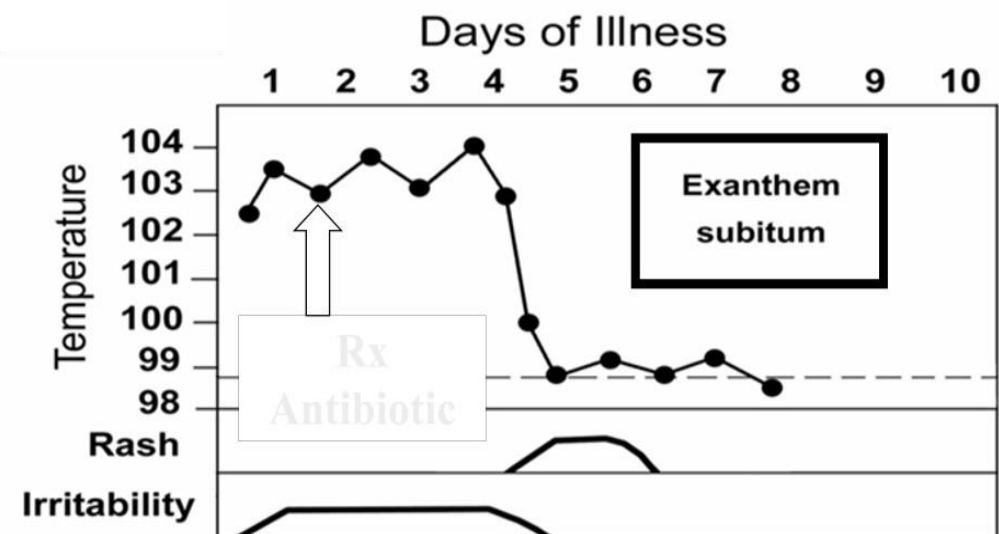
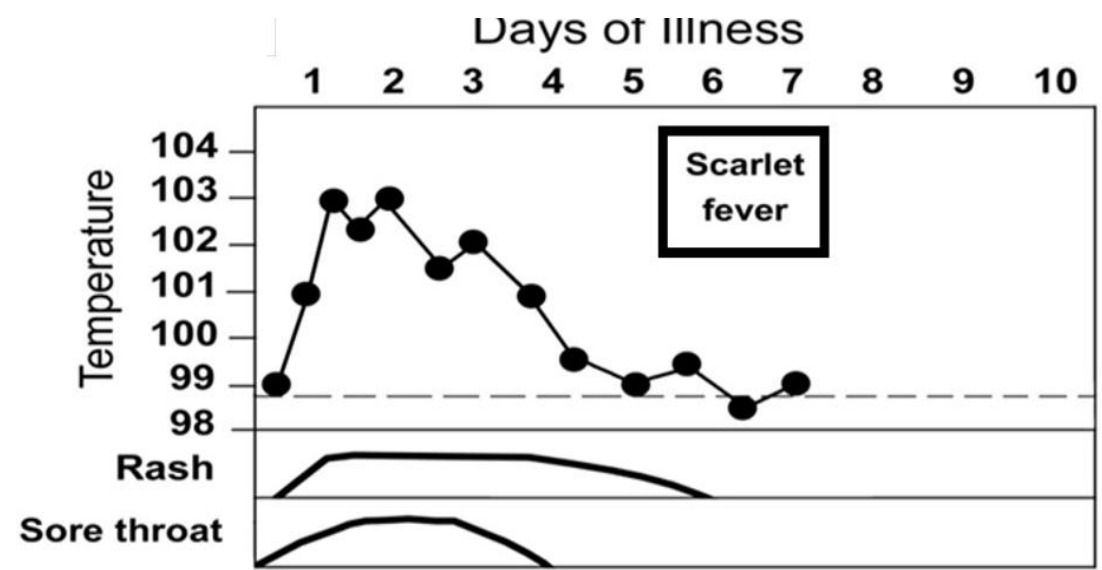
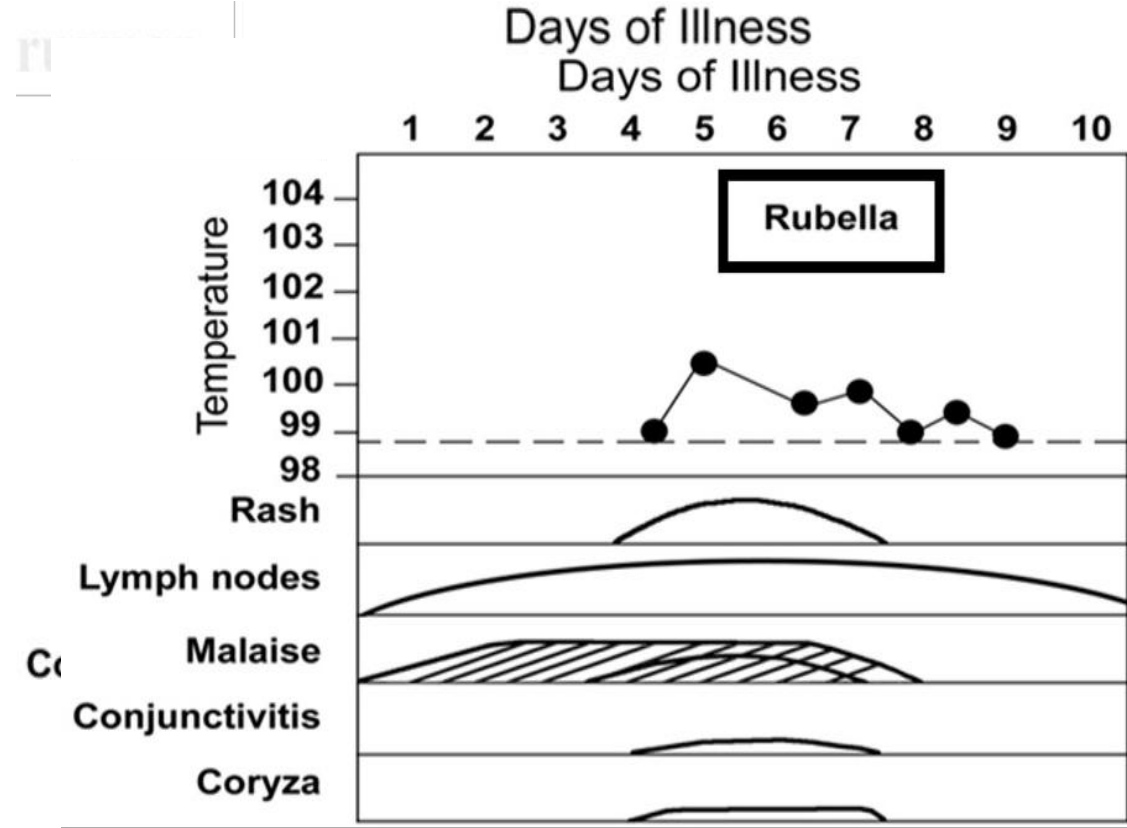
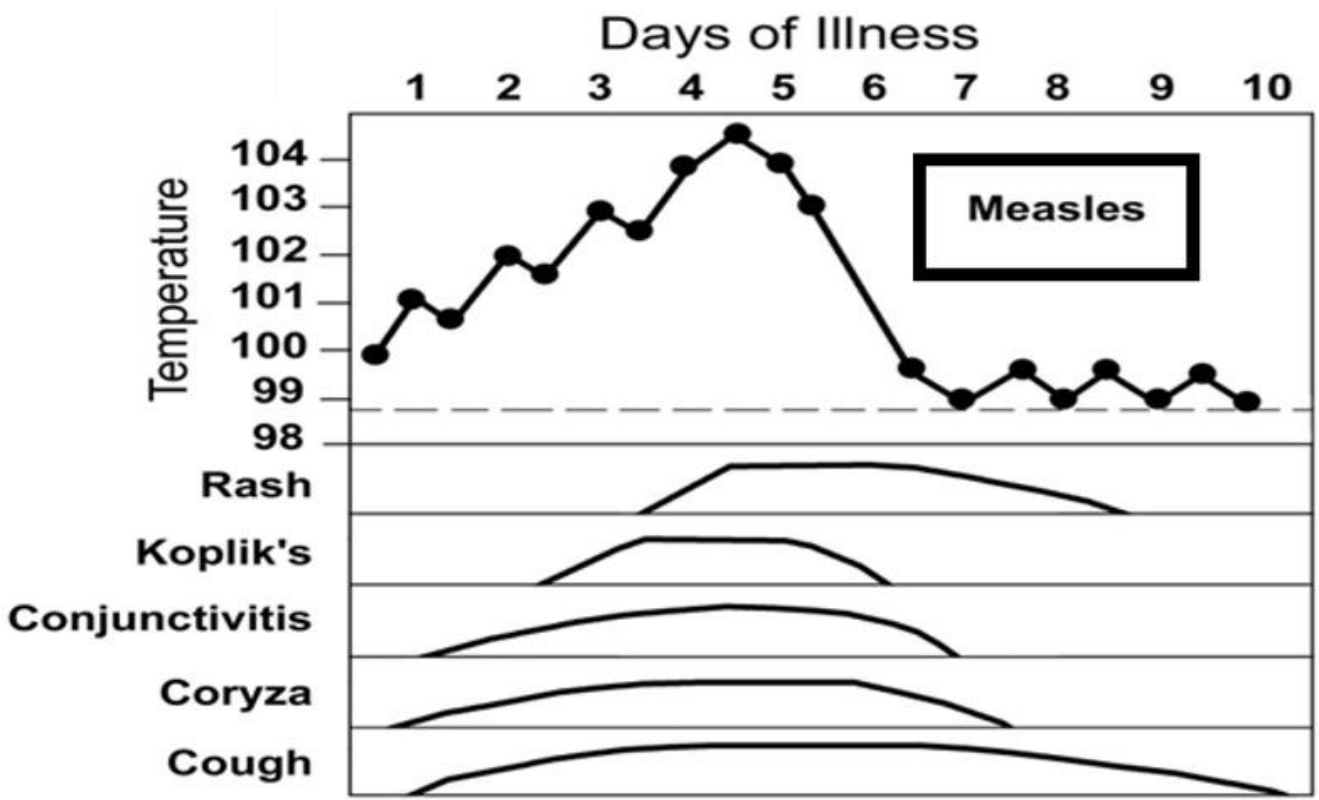
Roseola infantum

- HHV 6-7 (Human Herpes virus 6,7)
- Infant 90%
- Sudden onset of high grade fever
- Bulging anterior fontanel, convulsion
- Look well despite high fever

Fever fall on 3th -4th day with eruption of maculopapular rash

Supportive Tx.





Epstein Barr virus (EBV)

(Human herpes virus 4)

“Lymphocytotropic virus” เพิ่มจำนวน ใน WBC

Acute: Infectious mononucleosis (IM)

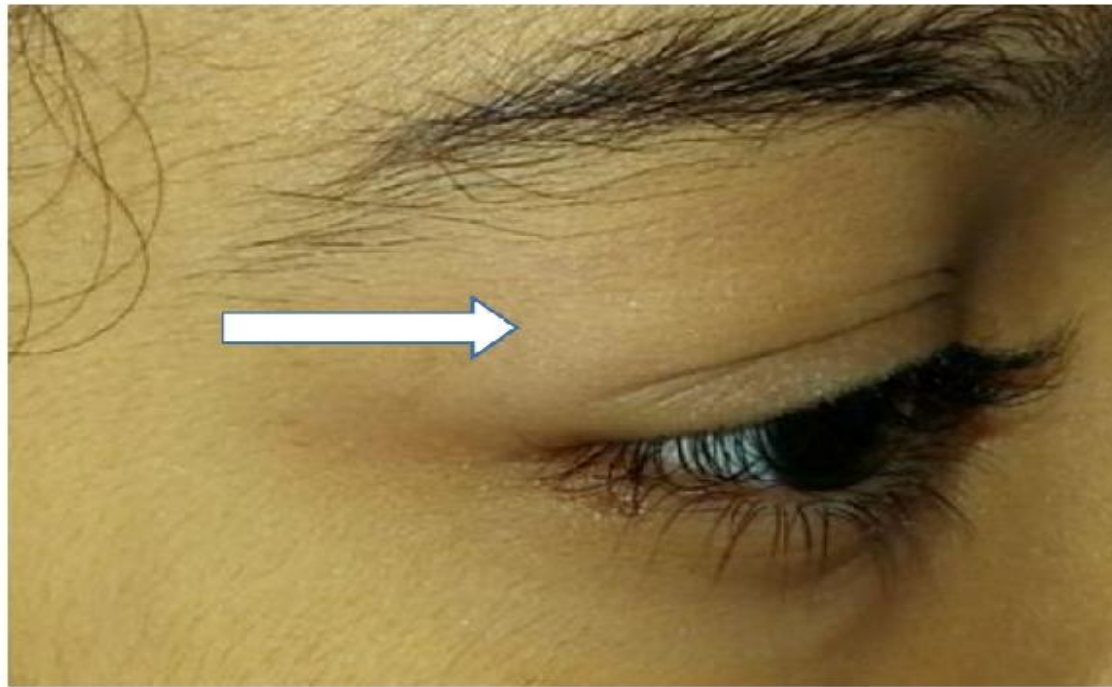
Latent:

- *Burkitt's Lymphoma,*
- *CA nasopharynx*
- Lymphoproliferative disease

Infectious mononucleosis (IM)

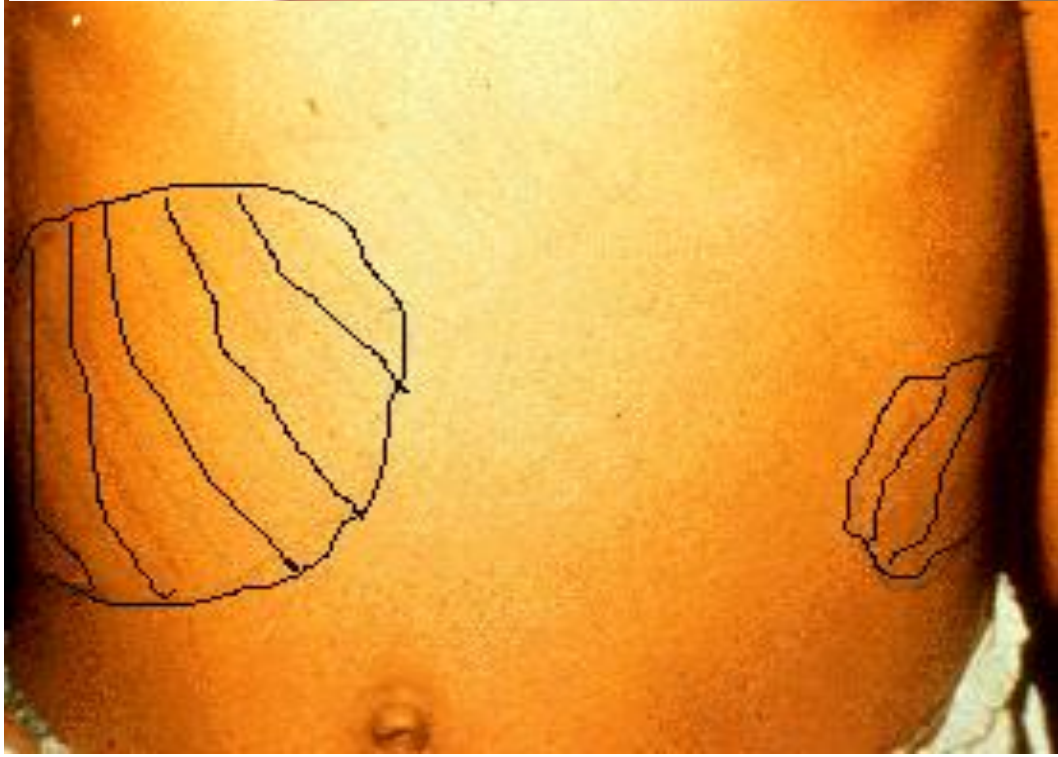
- Epstein-Barr virus (**HHV 4**)
- พบบ่อยในเด็กโต
- มีไข้สูง 4-14 วัน
- **LN โต เจ็บคอ ร่วมกับมี whitish patch**
- **Hepatosplenomegaly, ตาขาว (Hoagland sign), ตาเหลือง**
- ผื่นพบได้ในสัปดาห์แรก 10-15 %
- ได้ ยา **ampicillin** หรือ **amoxicillin** ผื่นขึ้น จะพบได้สูงถึงร้อยละ 90 ของผู้ป่วย

IM (EBV)



Hoagland
sign





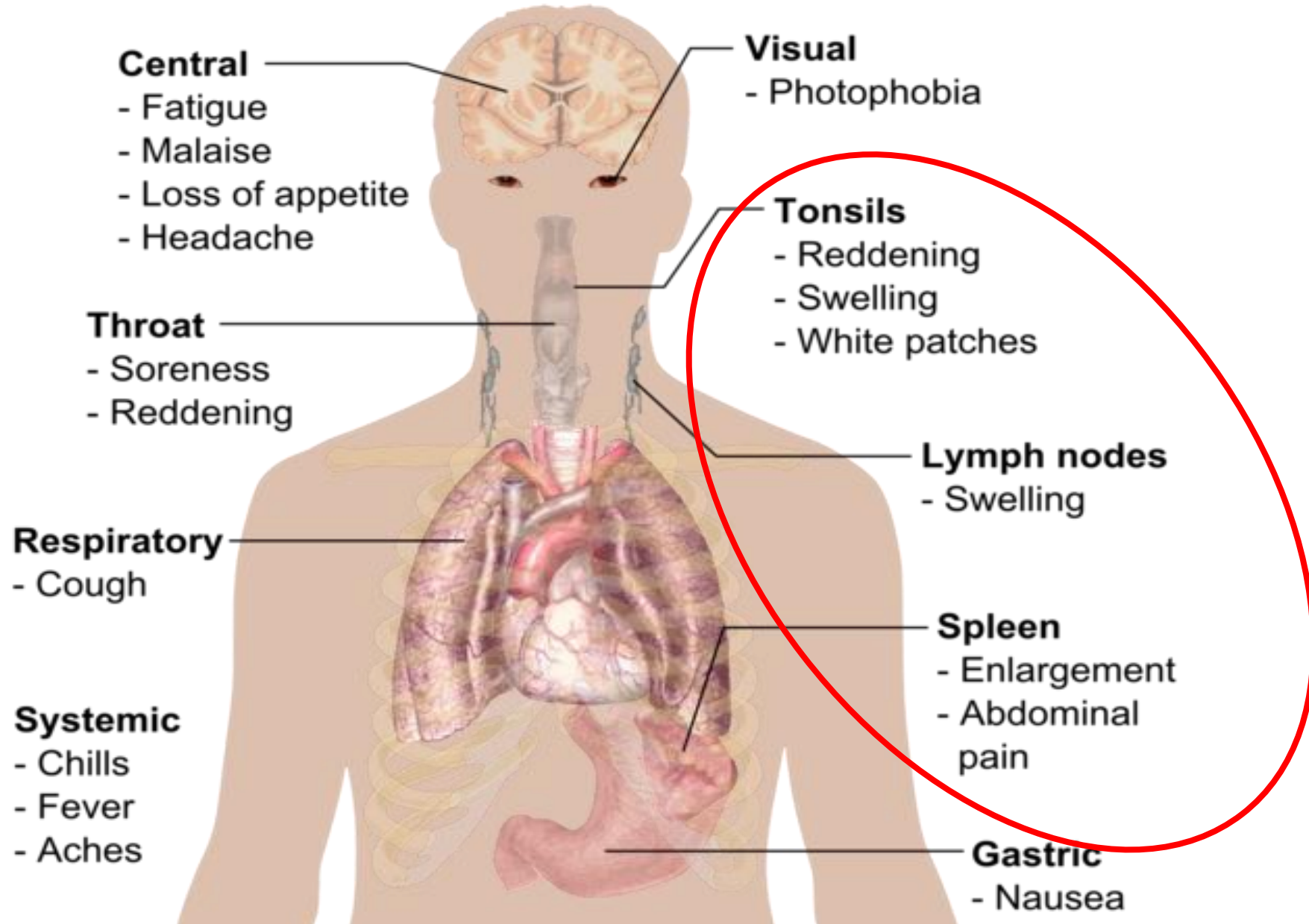


- Rashes after ampicillin in **IM**



EBV: Oral hairy leukoplakia in HIV

Main symptoms of Infectious mononucleosis



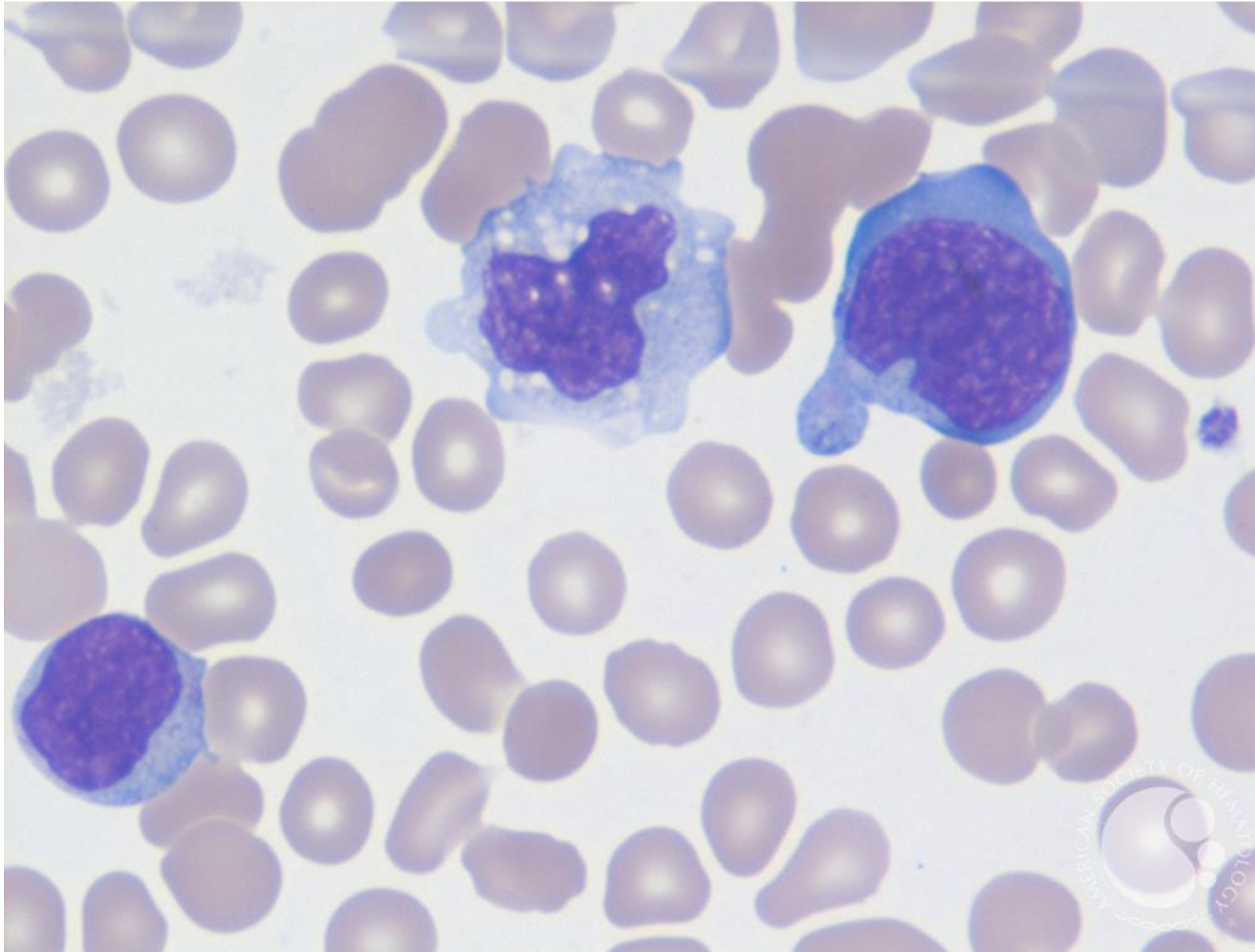
Infectious mononucleosis

- CBC : Lymphocytosis ; Atypical lymph 20-40%

Thrombocytopenia, hemolytic anemia

- Diagnostic : PCR , anti-VCA IgM, Heterophile Ab
- Tx: supportive
- Steroid :
 - Airway obstruction
 - Thrombocytopenia with hemorrhage,
 - Autoimmune hemolytic anemia (AIHA)
 - CNS

Infectious mononucleosis



Atypical lymphocyte

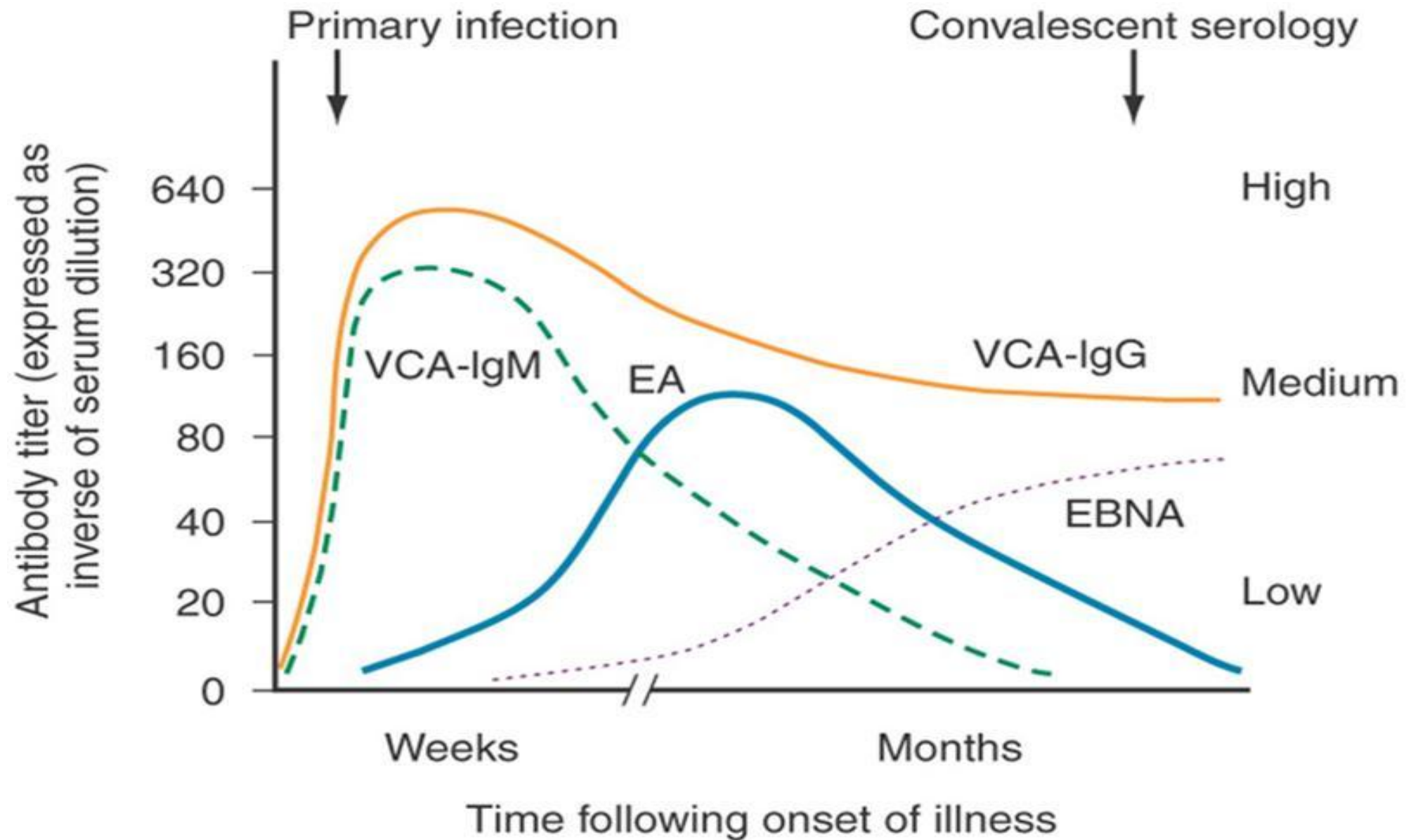
“Downey cells”

large lymphocyte

มี cytoplasm สีน้ำเงิน

และจะมี RBC อยู่รอบ ๆ -->

Infectious mononucleosis



Parvovirus B19 (Fifth Disease)

erythema infectiosum

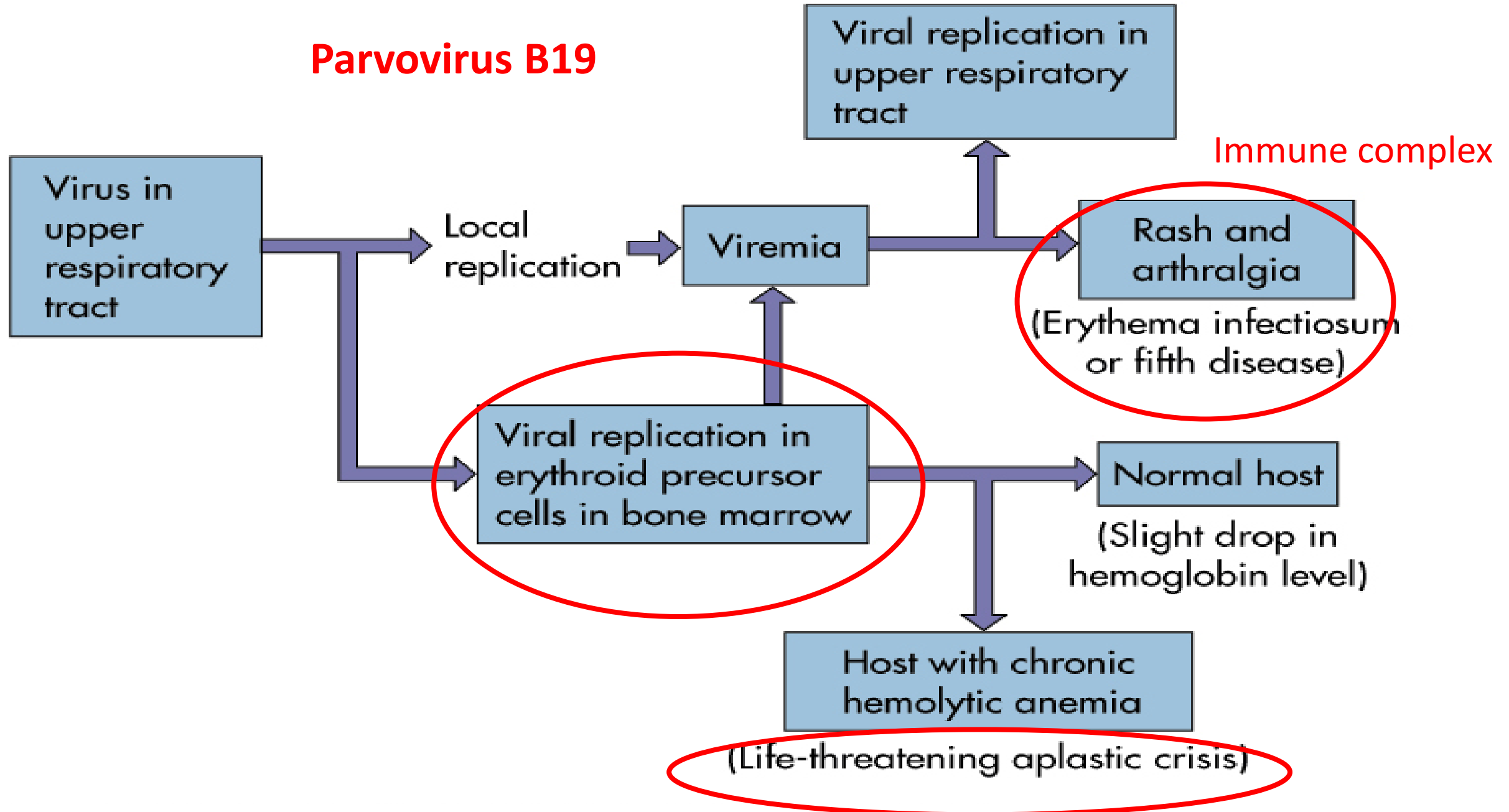
"slapped cheek"

childhood

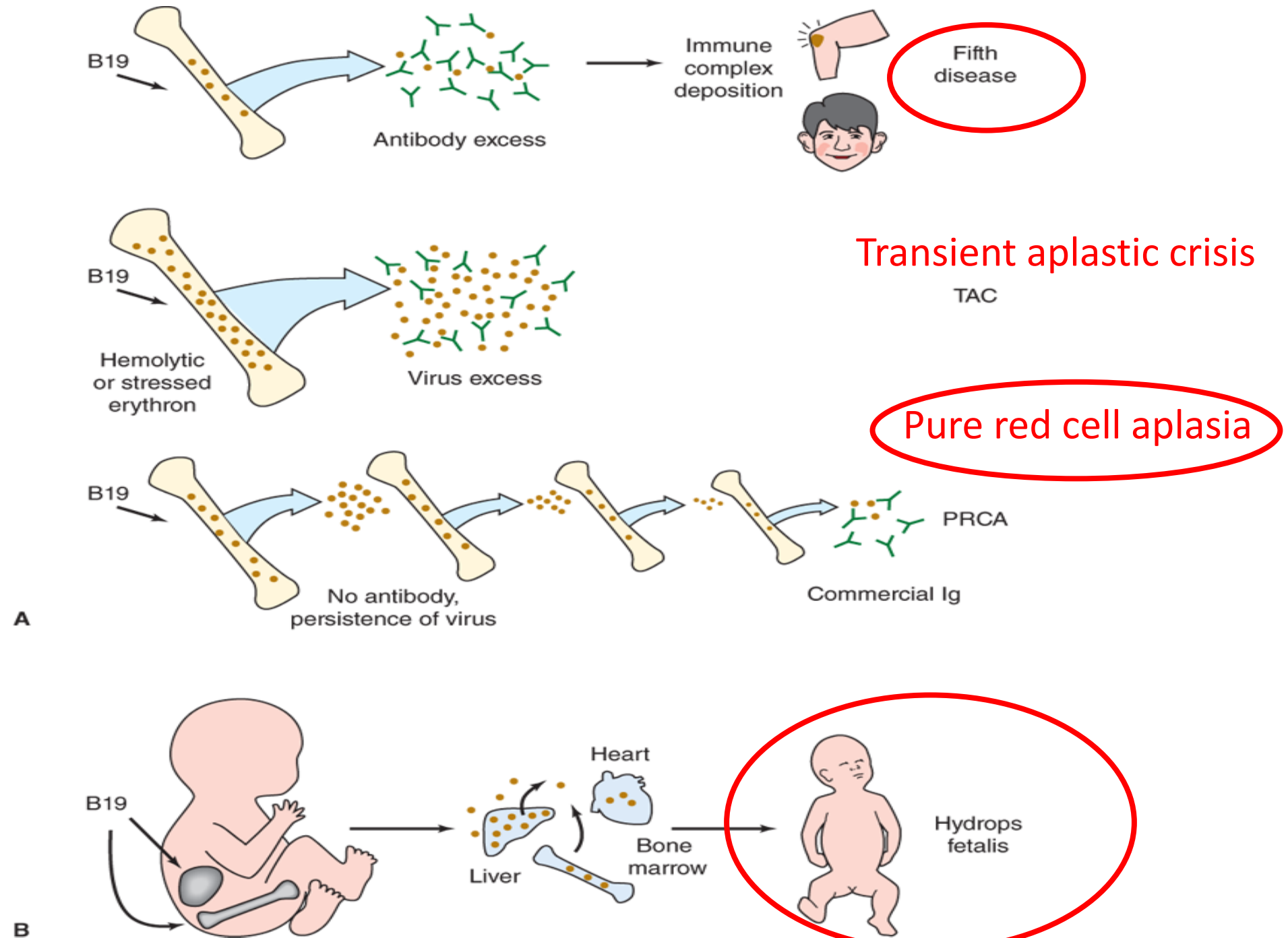


Lace like rash

Parvovirus B19

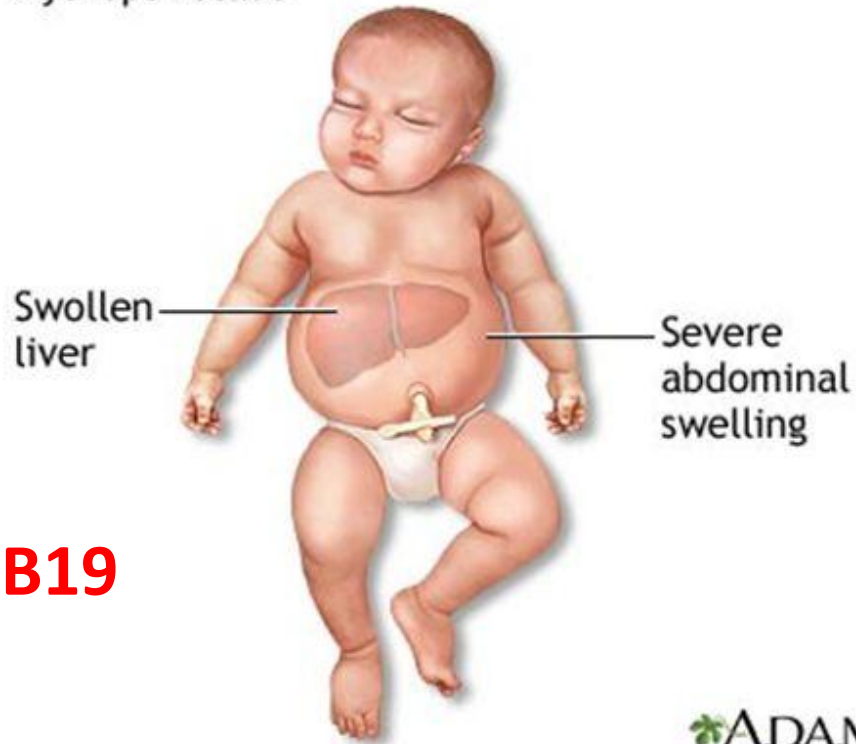


Parvovirus B19



Hydrops fetalis

Hydrops fetalis



Parvovirus B19



- Human hydropic fetus and placenta after intrauterine parvovirus B19 infection
- Hydrops is an edema (swelling due to lymph fluid) in subcutaneous tissue

Parvovirus B19

- Replication in erythroid progenitor cell
- Transmission : airborne, droplet
- Disease
- Fifth disease: erythema infectiosum (Fever, rash)
- Pure red cell aplasia
- Aplastic crisis
- Congenital parvovirus : Hydrops fetalis
- Associated: Encephalitis, SLE, Henoch Schoenlein purpura etc.
- Dx IgG, IgM, PCR
- Tx, supportive tx

Vesiculopustular eruption

1. Herpes simplex Virus

- Type I ; Herpes gingivostomatitis
- Type II ; Genital Herpes, Neonatal herpes

2. Varicella virus infection

- Chicken pox
- Herpes Zoster

3. Enterovirus infection

- Hand Foot and Mouth disease

Herpetoviridae (Human herpesvirus)

DNA virus/ Inclusion body/Latent infection

Herpes simplex virus type 1 (HSV-1)

- Herpes simplex virus type 2 (HSV-2)
- Varicella zoster virus (VZV)
- Human herpes virus 4: Epstein Barr virus(EBV)
- Human herpes virus 5: Cytomegalovirus(CMV)
- Human herpes virus 6 : Roseolar infantum
- Human herpes virus 7: Roseolar infantum(mild)
- Human herpes virus 8: Kaposi's sarcoma

Herpes simplex virus



Primary herpes
gingivostomatitis



Herpes labialis

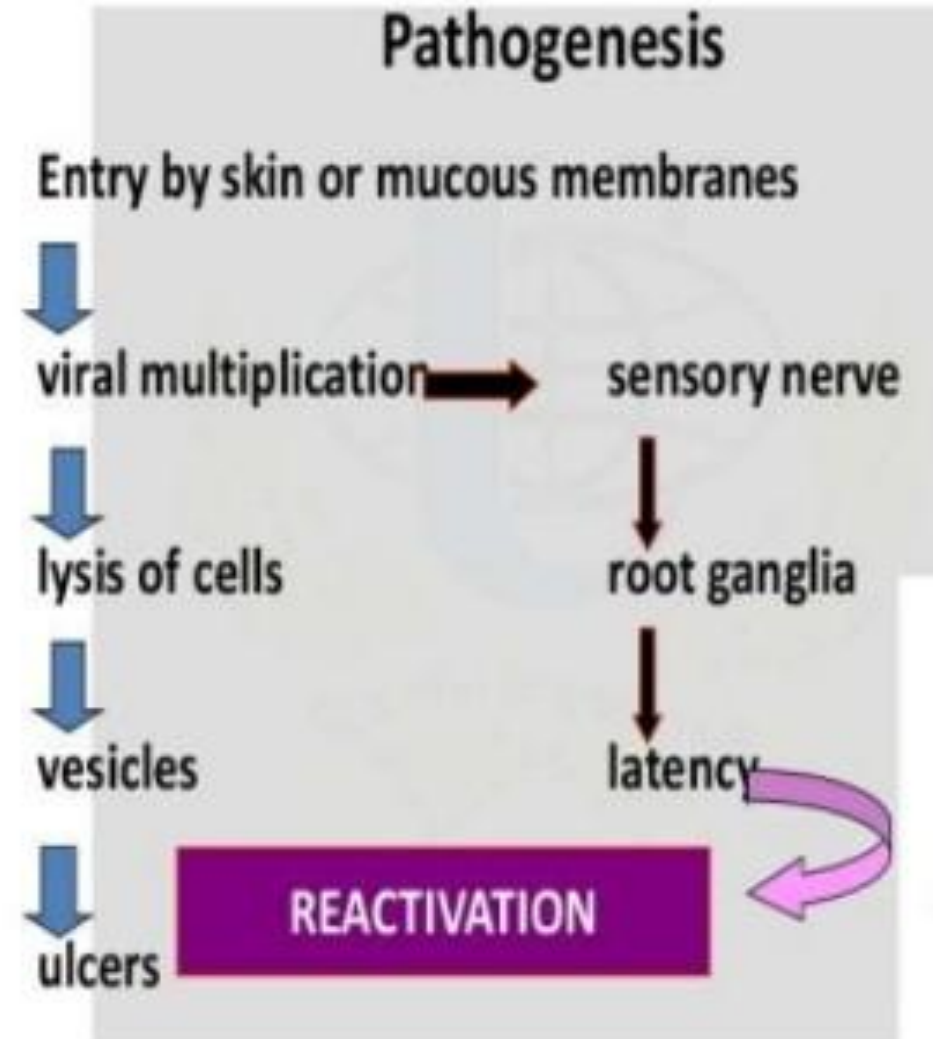
Mucocutaneous HSV: Acyclovir 400 mg x5x 7 d

	HSV - 1	HSV - 2
1. Transmission	หายใจ, สัมผัส	เพศสัมพันธ์ แม่ → ลูก (สัมผัส)
2. Clinical feature	herpes labialis gingivostomatitis, keratitis	genital,
3. การติดเชื้อซ้ำ	น้อยกว่า	บ่อยกว่า
4. Cancer	Oral cancer	Cervical cancer
5. Treatment	Acyclovir	Acyclovir

Herpes simplex virus

Pathogenesis

- ◉ Ballooning of infected cells
- ◉ Production of Cowdry type A intranuclear (**Lipschutz**) inclusion bodies
- ◉ Margination of chromatin
- ◉ Formation of multinucleated giant cells

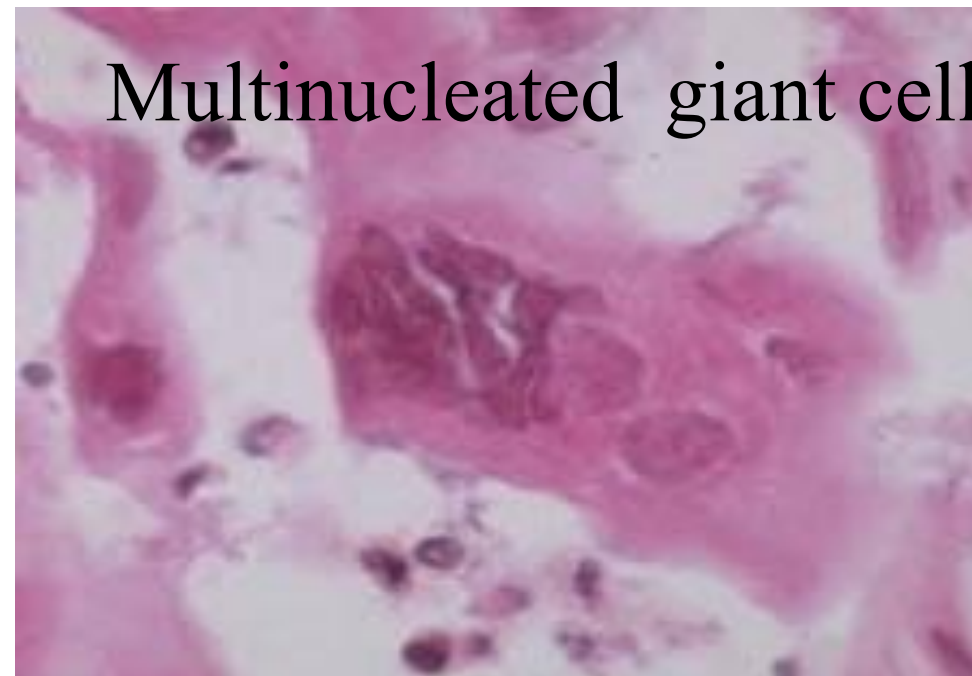




Herpes whitlow



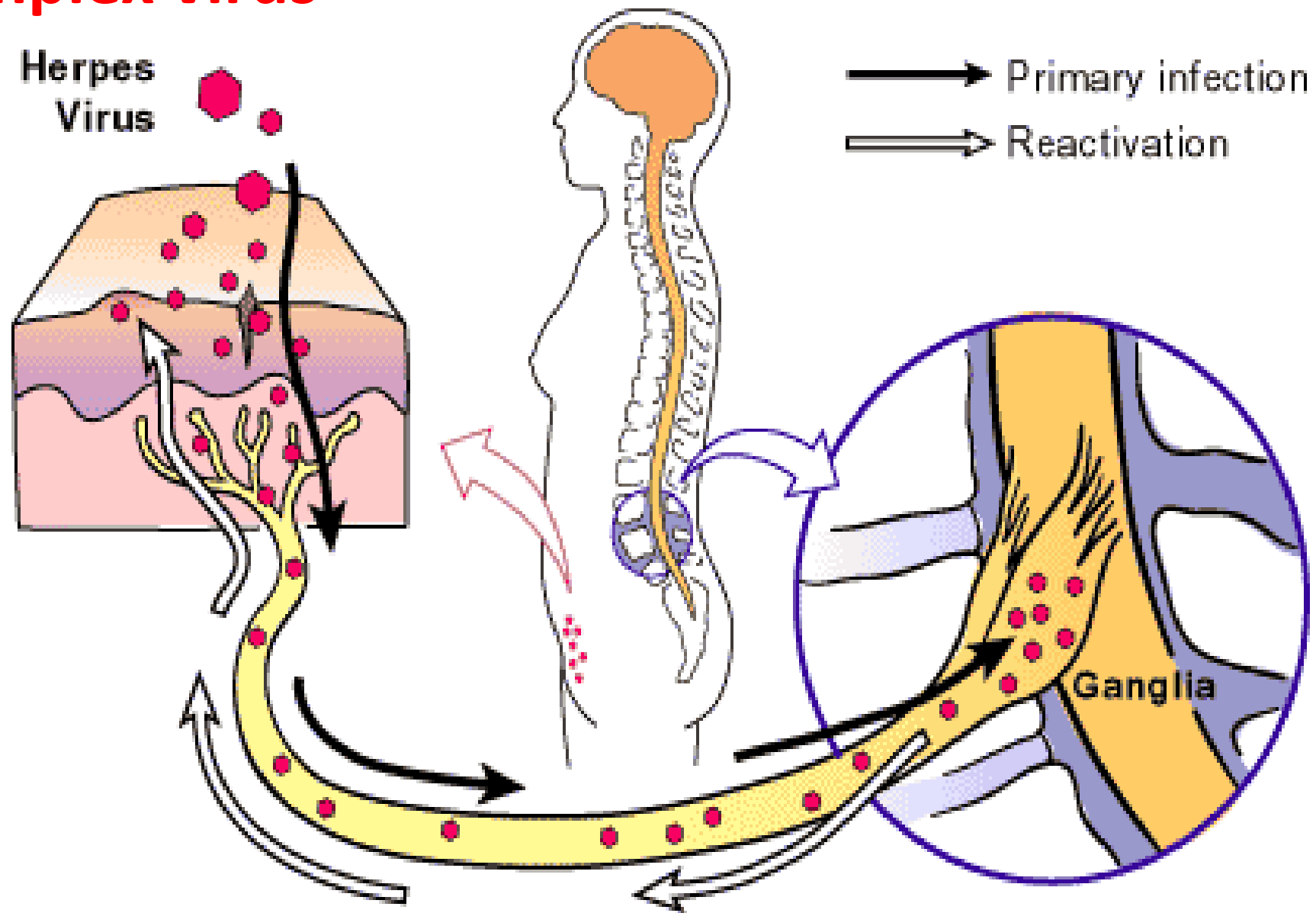
Herpes keratitis



Multinucleated giant cell



Herpes simplex virus

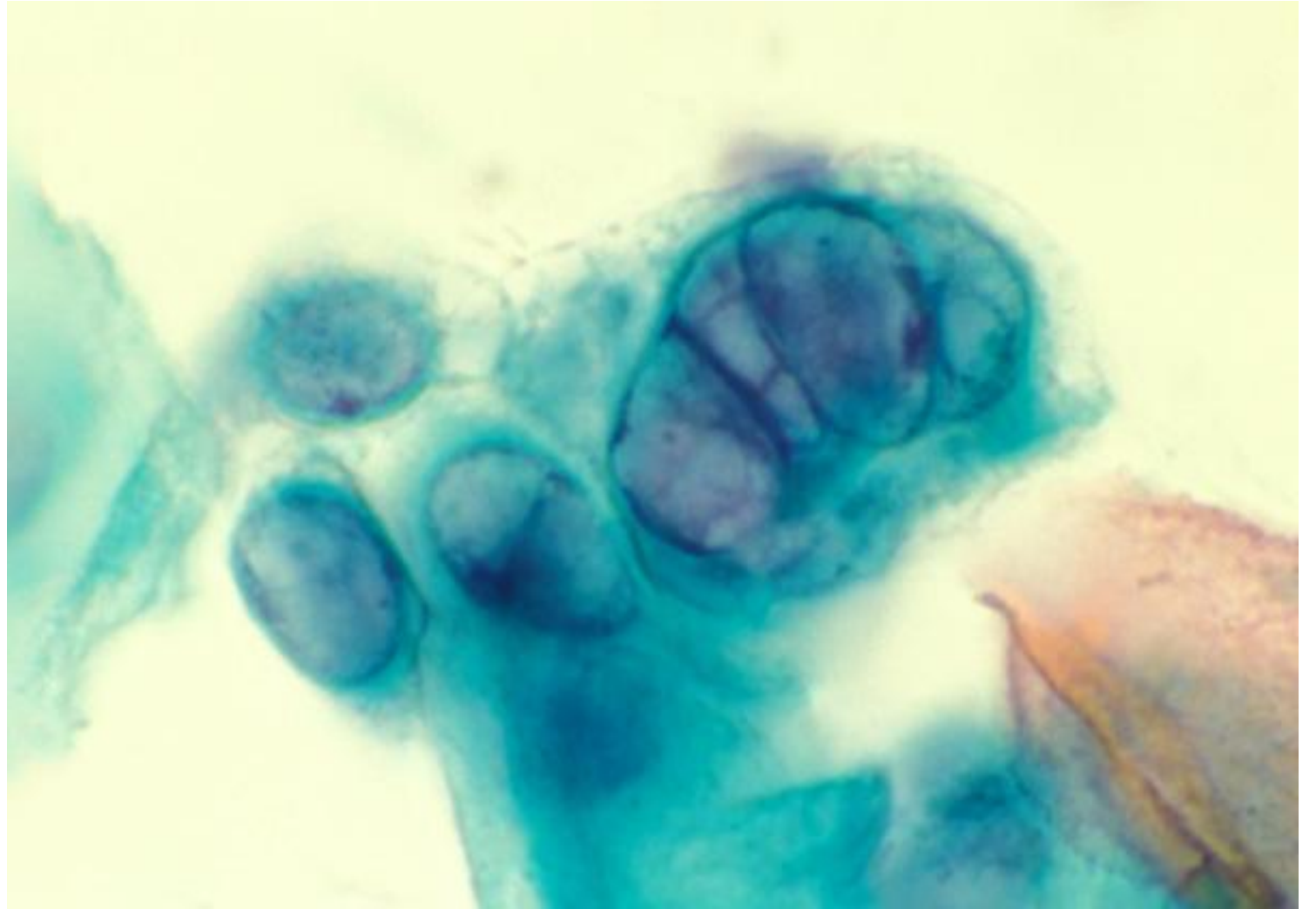


Herpes simplex virus

Tzanck Test

LAB –PCR
 - Tzanck test

Tx: Acyclovir



Multinucleated giant cell

Varicella zoster Viruses(HHV-3)

- Chicken pox - primary infection
- Herpes zoster - reactivation of infection

Chicken pox

- Rash: rapid evolution 6-8 hr, multistage, various stage
- LAB: IgG, IgM
- Tx Acyclovir in severe varicella
- Prevention:

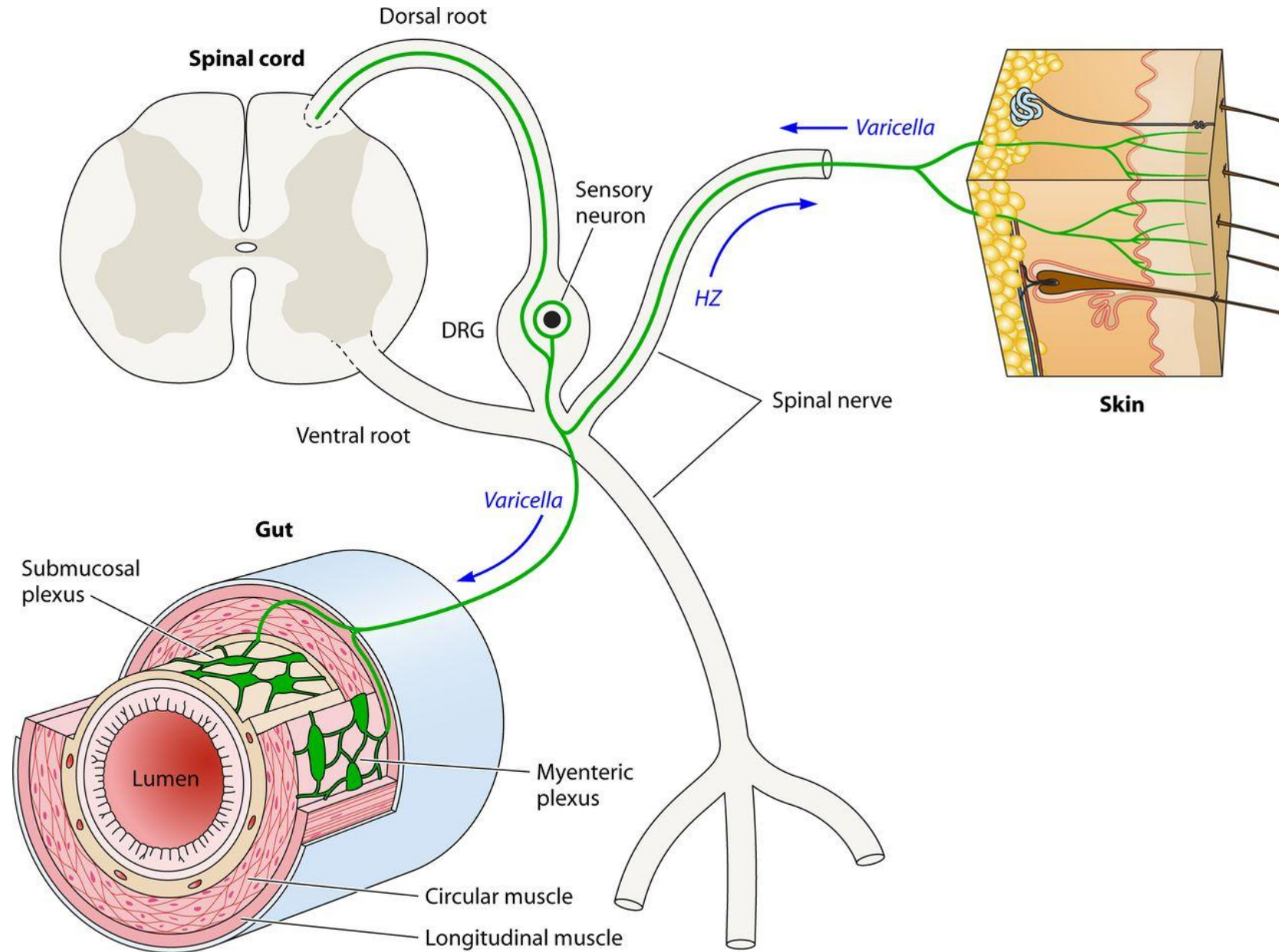
Varicella vaccine

Varicella Immunoglobulin: VZIG



multistage, various stage rash

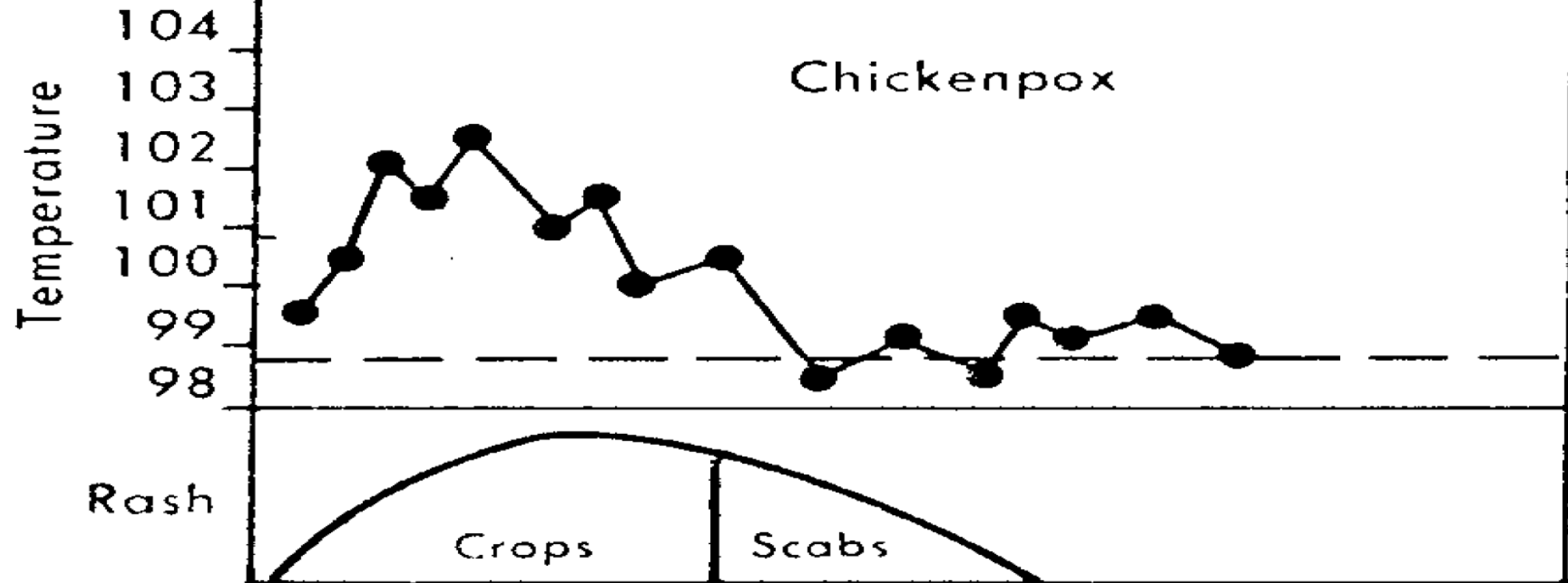
Potential routes taken by VZV during its life cycle.



Chicken pox

Day of illness

1 2 3 4 5 6 7 8 9 10 11 12 13 14

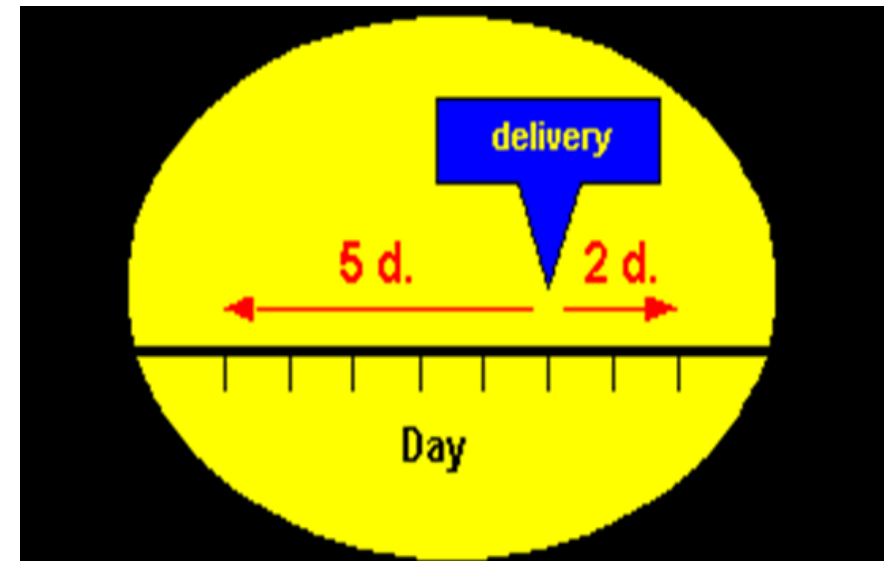


Neonatal chickenpox

- first 10 days of life
- mother develops varicella from 5 days before to 2 days after delivery,

Most common clinical manifestations

- Disseminated fulminant ,
- Diffuse pneumonia,
- Severe hepatitis
- Meningoencephalitis
- Approximately 1/3 die,



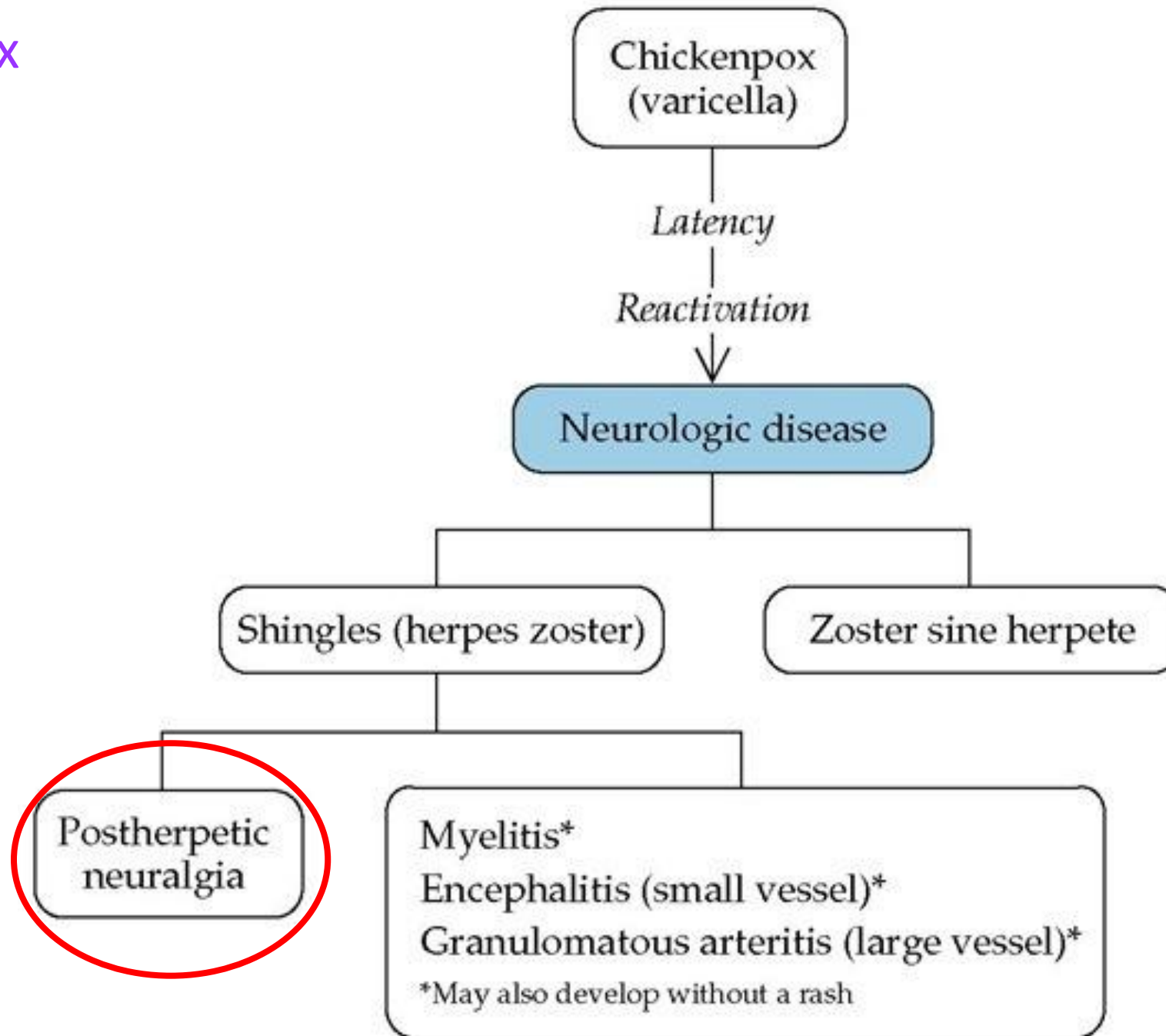
Herpes zoster(Shingles)

- เกิดในคนที่เคยเป็น chicken pox,
- มี vesicles ตามแนว dermatome
- เกิด post herpetic neuralgia
- Tx Acyclovir
- 800 mg x 5 x 7 days

Herpes zoster(Shingles)



Chickenpox



Treatment of HSV, VZV Infection

Diseases	Anti-viral agents + dose	Duration
Primary orifacial HSV	Acyclovir 200 mg 5x/d Acyclovir 400 mg 3x/d	7-10 d or until resolution
Recurrent orofacial HSV	Acyclovir 400 mg 5x/d Acyclovir cream 5x/d	4-5 d or until resolution 4 d
Primary genital HSV	Acyclovir 200 mg 5x/d Acyclovir 400 mg 3x/d	7-10 d or until resolution
Recurrent genital HSV	Acyclovir 800 mg 2x/d Acyclovir 800 mg 3x/d	5 d or until resolution 2 d
Suppressive treatment for HSV	Acyclovir 400 mg 2x/d	6-12 mo
Chickenpox	Acyclovir 800 mg 5x/d	7 d
Herpes zoster (age >50 yr, CN involvement)	Acyclovir 800 mg 5x/d	7 d

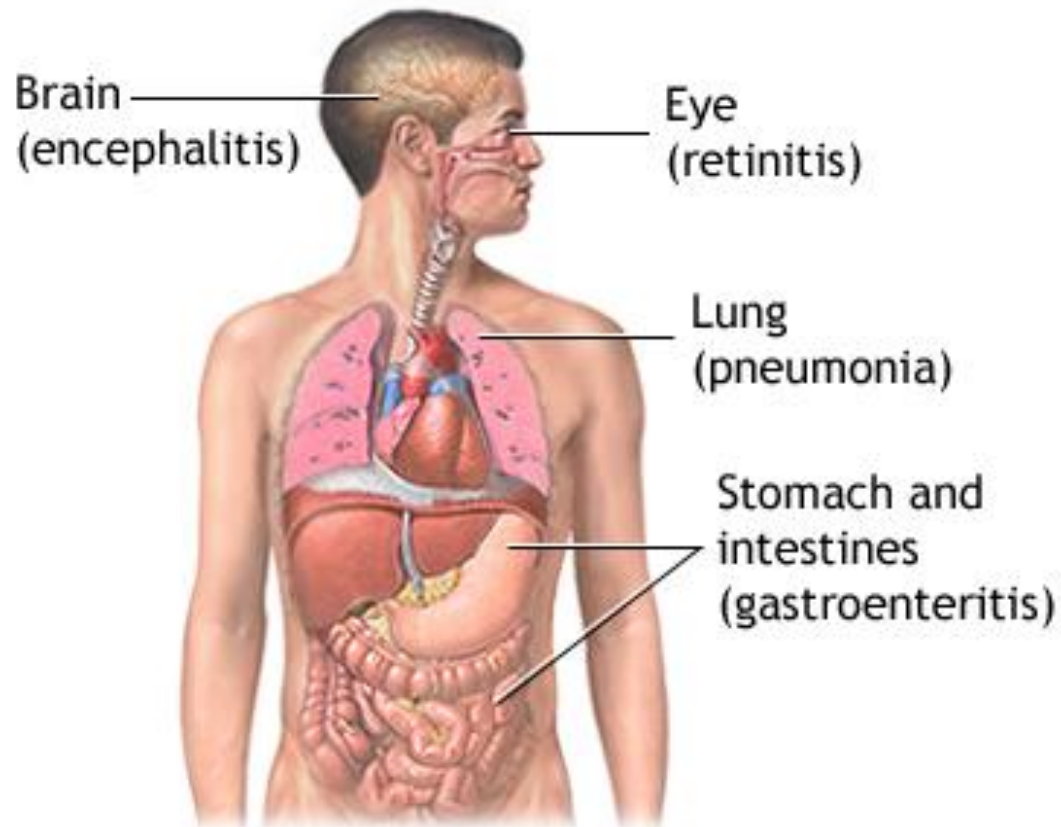
CMV: Cytomegalovirus /HHV-5

Latent infection : Most common → Immunocompetent : reactivation

Mononucleosis like syndrome → Immunocompetent

Tissue invasive disease : immunocompromised → Transplant , chemotherapy

30% most common in GI (CMV colitis)



CMV spread Via



- 1 Sexual
- 2 Blood transfusion
- 3 Throug
- 4 At birth
- 5 Breast feeding
- 6 Air born

Congenital CMV HHV-5

- Classic triad of symptoms:
 - *Chorioretinitis*
 - *Hydrocephalus*
 - *Intracranial calcifications*



- Other symptoms include fever, rash, HSM, microcephaly, seizures, jaundice, thrombocytopenia, lymphadenopathy

Congenital CMV

Transient Outcomes

- Hepatomegaly
- Splenomegaly
- Jaundice
- Petechia and purpura
- Pneumonitis
- Fetal growth retardation
- Seizures

Permanent Outcomes

- Microcephaly
 - Vision loss
 - Hearing loss
 - Mental retardation
 - Motor disabilities
 - Seizures
 - Death
-

Cytomegalovirus CMV: (HHV-5)

LABORATORY DIAGNOSIS

1. Virus Isolation, PCR

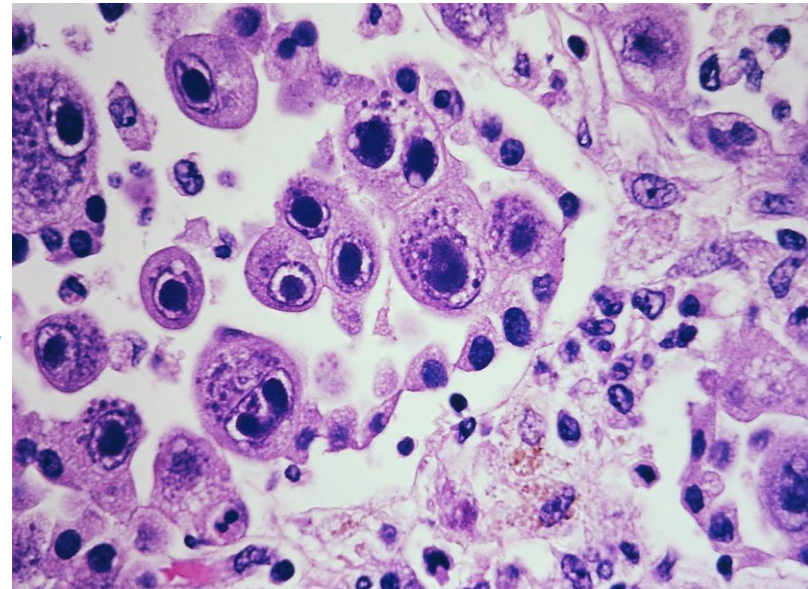
Urine, saliva, blood and biopsy

2. Serology

CMV IgM antibodies are detected in
primary infection and lasts 3 - 4 months

CMV IgG is produced early in
primary infection and persists lifelong.

Rising titres of IgG can be used as markers of acute infection.



owl's eye intranuclear viral inclusions body

CMV

LAB : PCR

IgG, IgM

CMV : Treatment

- Ganciclovir
- Valganciclovir
- Foscarnet
- Cidofovir



The infographic is set against a light pink background. It features a vertical list of five infections, each preceded by a circular icon. The first two icons are labeled '1)' and '2)' respectively. To the right of the list is a stylized purple line drawing of a pregnant woman. At the top right of the infographic is a solid light orange rectangle.

TOXOPLASMOSIS

OTHER INFECTIONS
1) SYPHYLIS 2) PARVOVIRUS B19

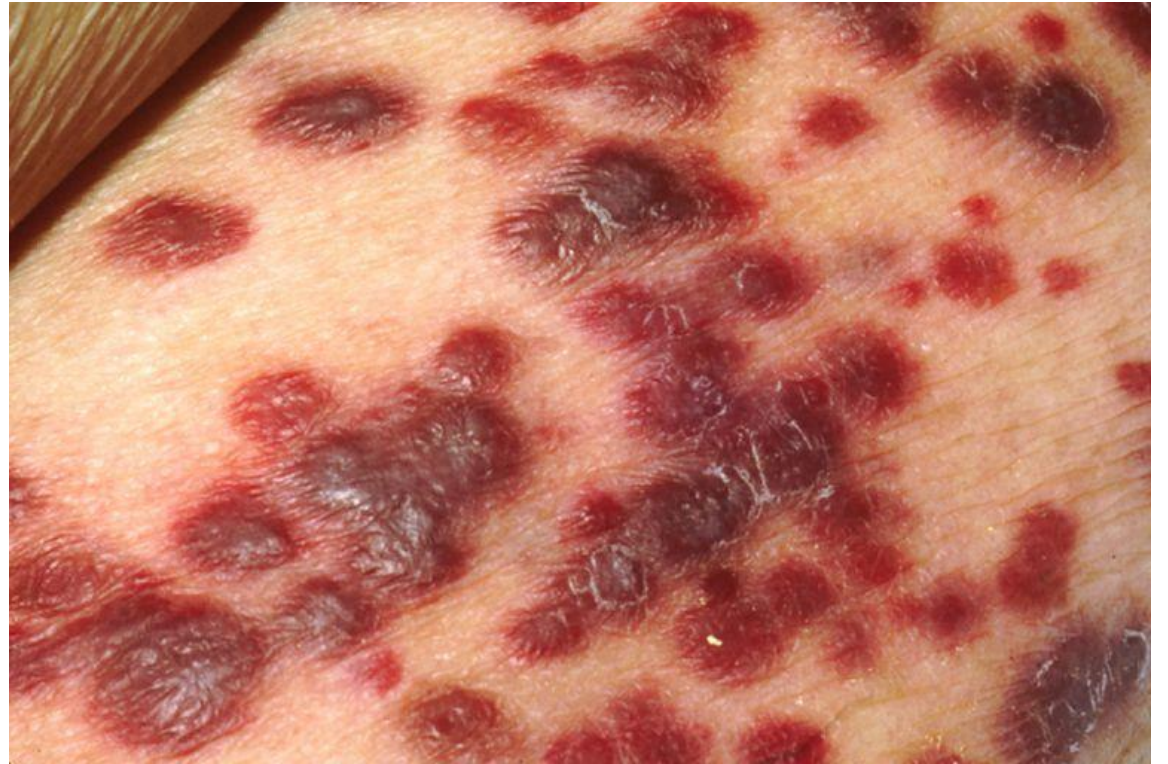
RUBELLA

CYTOMEGALOVIRUS

HERPES SIMPLEX VIRUS

Kaposi's sarcoma (HHV8)

- Vascular tumor in HIV



Hand Foot and Mouth Disease

- Enterovirus 71, Coxsackie A 16
- Fecal Oral route
- Fever + vesicles
- Complication :
- Brainstem encephalitis , Myocarditis,



Complication
Enterovirus 71

Aseptic meningitis
Brain stem encephalitis
(Rhombencephalitis)
Autonomic nervous system
dysregulation

LAB: PCR

Tx IVIG

Hand, Foot and Mouth Disease / Herpangina



Central Nervous System Involvement



Automatic Nervous System Dysregulation

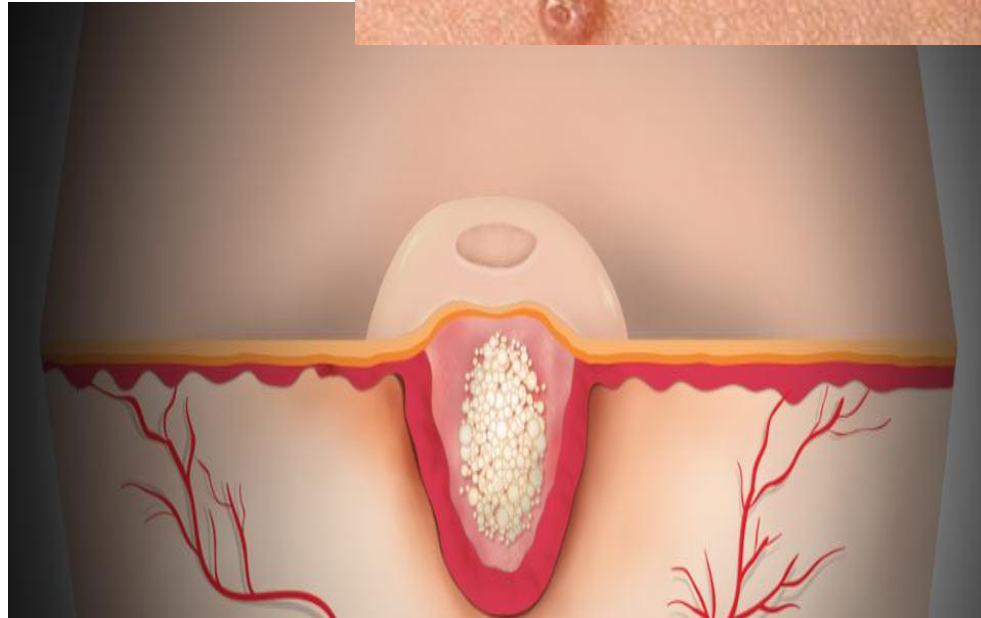


Cardiopulmonary Failure

Molluscum contagiosum

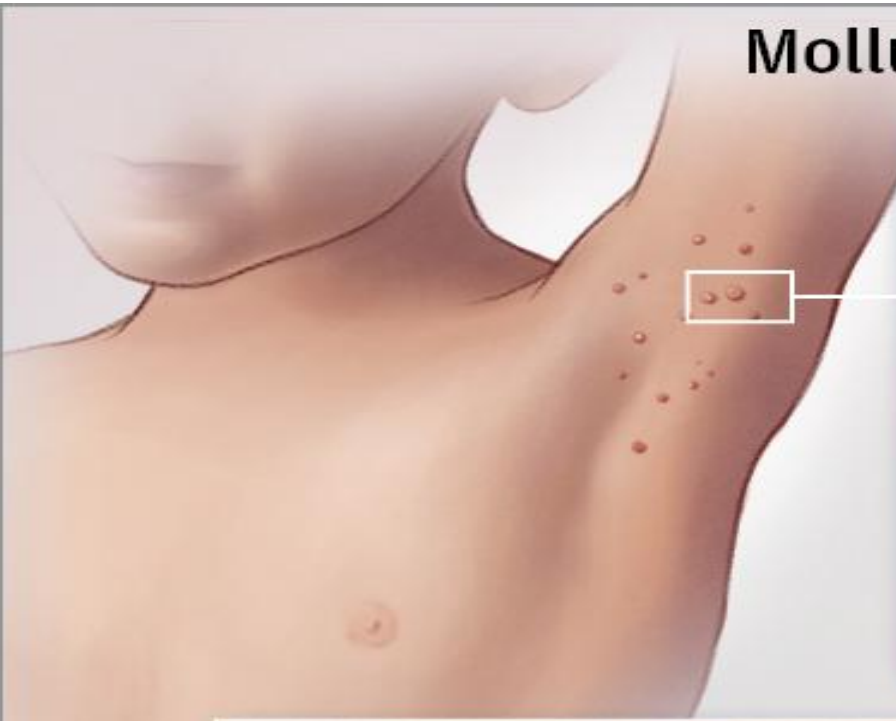
Oncogenic virus

- Molluscum contagiosum virus
- Family *Poxviridae*,
- direct contact : sexual transmission





Molluscum Contagiosum



Molluscum bumps are usually small, dome-shaped, and shiny. The bumps usually have a central dimple.



The bumps can become red, swollen, or pus-filled. Scratching may cause the bumps to spread.



Eczema-like skin may develop around the molluscum.

S. Welker

Molluscum contagiosum : Treatment

- Trichloroacetic acid
- Topical podophyllotoxin cream (Condylox)
- Imiquimod
- Cryosurgery

Human papillomavirus (HPV)

- *Papillomaviridae* : **Oncogenic Virus**
- HPV 16, HPV 18 (13%) : **cervical cancers**
- **HPV 6 HPV 11 : skin lesion**
- Wart (common, plantar, palmar warts)
- Condyloma acuminata (genital wart, perianal wart)
- Laryngeal papillomatosis
- Anogenital cancer
- Tx: Imiquimod, Podofilox, Podophyllin, Cryotherapy

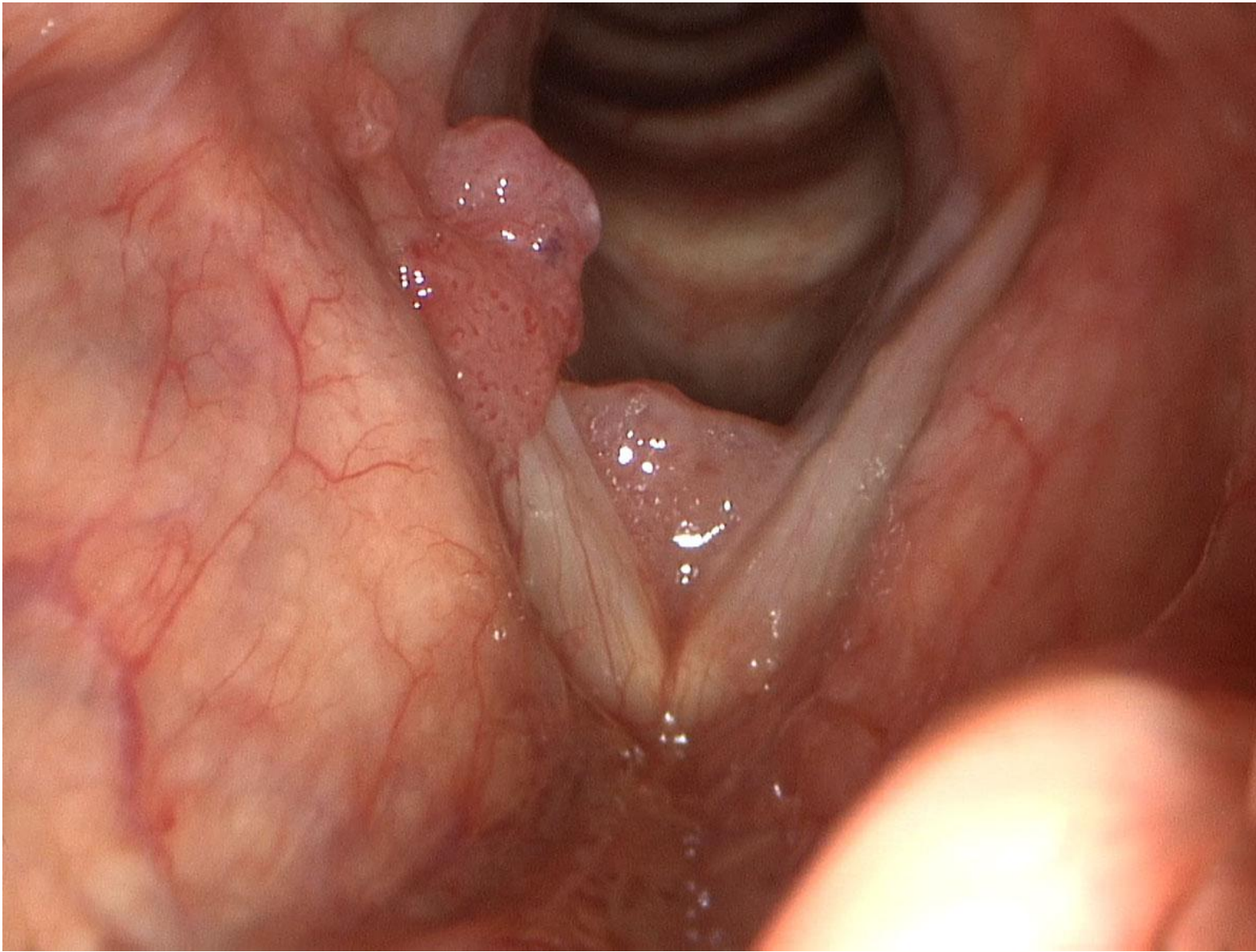


www.brightonpodiatry.com.au



Condyloma acuminata
(genital wart, perianal wart)





Laryngeal papillomatosis

Specimens

- Vesicle fluid
- CSF
- Serum

Diagnosis

- NAAT
- Immunofluorescence
- EM
- Culture
- Serology

PCR

Treatment

- Aciclovir
- Famciclovir

Relapse

Latent virus
in dorsal
root ganglion

Recurrent cold sores
or keratoconjunctivitis

Ramsay hunt syndrome ?

Latent virus
in dorsal
root ganglion

Relapse causes
shingles &
postherpetic
neuralgia

Pneumonia
(high mortality)

Adult
infection
severe

Temporal lobe

Acute
encephalitis

Oral or
genital
lesions

Skin
lesions

Neonatal
infection

CSF

α

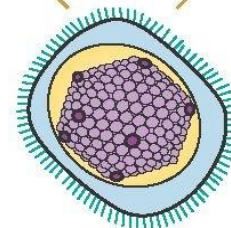
Herpes simplex

VZV

Skin lesions
Encephalitis
Multi-organ
disease

Neonata
herpes

Primary



VZIG?

Specimens

- Vesicle fluid
- Skin scraping
- Serum

Diagnosis

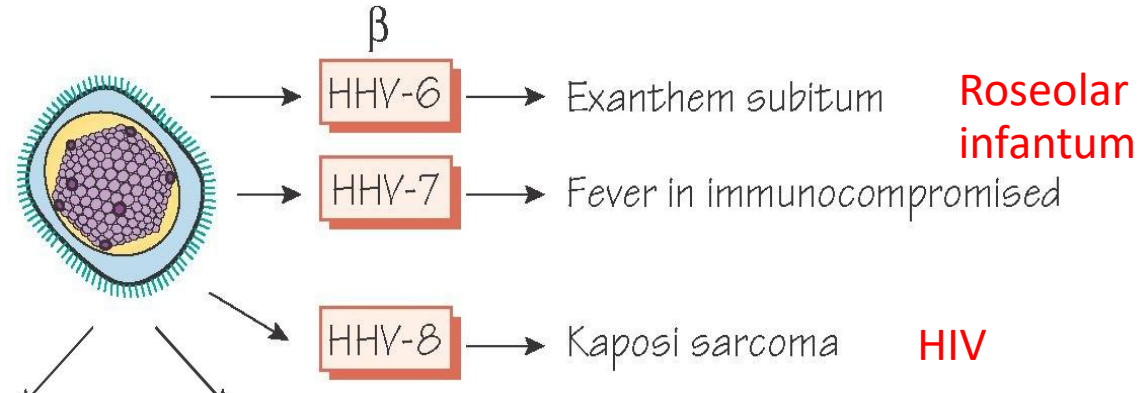
- NAAT
- Immunofluorescence
- Culture
- Serology

Treatment

- Aciclovir
- Vaccine available

CMV, EBV, HHV6-8

Infectious mononeucleosis
-Lymphadenopathy
-Atypical L
-Hepatosplenomegaly



β

CMV
Viral load by NAAT

Epithelial cells

Virus shed in
urine & pharynx

Severe disease in
immunocompromised

- Pneumonia
- Retinitis
- Enteritis

γ

EBV

B-lymphocytes
& epithelial cells

Infectious
mononucleosis

Congenital infection

- Fetal death
- Hearing loss
- Ocular disease
- Cerebral damage

Post-transplant lymphoma
Nasopharyngeal carcinoma
Burkitt's lymphoma

Specimens

- Blood
- Urine
- Saliva

Diagnosis

- Immunofluorescence
- NAAT
- Culture

Treatment

- Ganciclovir
- Foscarnet

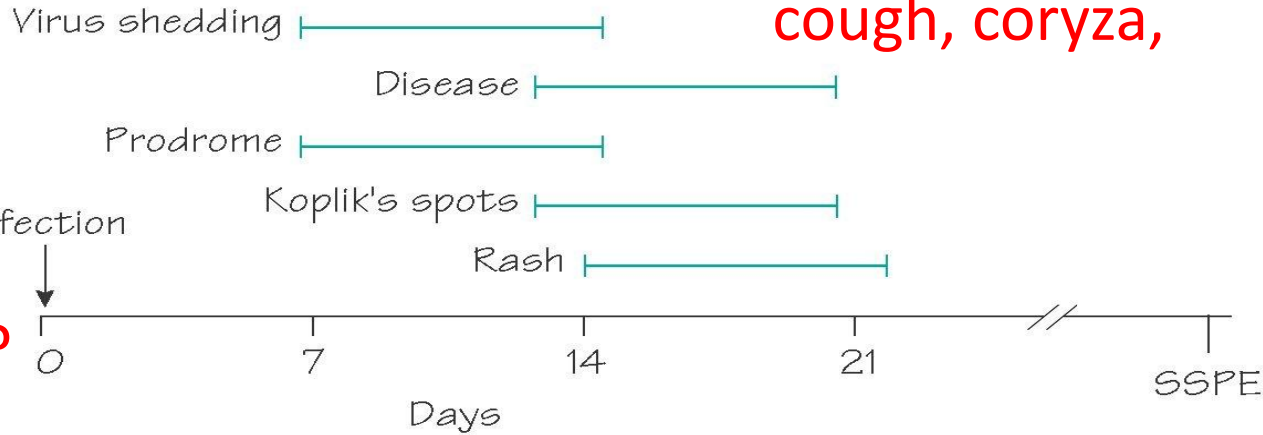
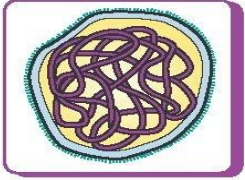
Specimens

- Serum
- Throat gargle

Diagnosis

- Serology
- NAAT
- Culture

Measles virus



Vaccine?

**3C: Conjunctivitis
cough, coryza,**

Measles

Specimens

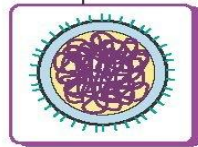
- Serum
- Nasopharyngeal secretion

Diagnosis

- IgM
- Antigen detection
- NAAT detection

Mumps, Measle, Rubella

Mumps virus



Infection

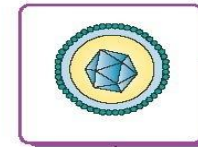
Primary viraemia

Salivary glands
– parotitis

Testes
Ovaries
Pancreas
Meningitis

Secondary viraemia

Rubella virus



Adults

Mild disease &
postinfection arthritis

Congenital transmission
– Cataracts
– Deafness
– Hepatitis
– Thrombocytopenia

**Celery stalk .
Cong rubella.**

Children

Mild infection
Fever & rash

Mumps

Specimens

- Serum
- Saliva
- CSF

Diagnosis

- Culture
- IgM
- NAAT detection

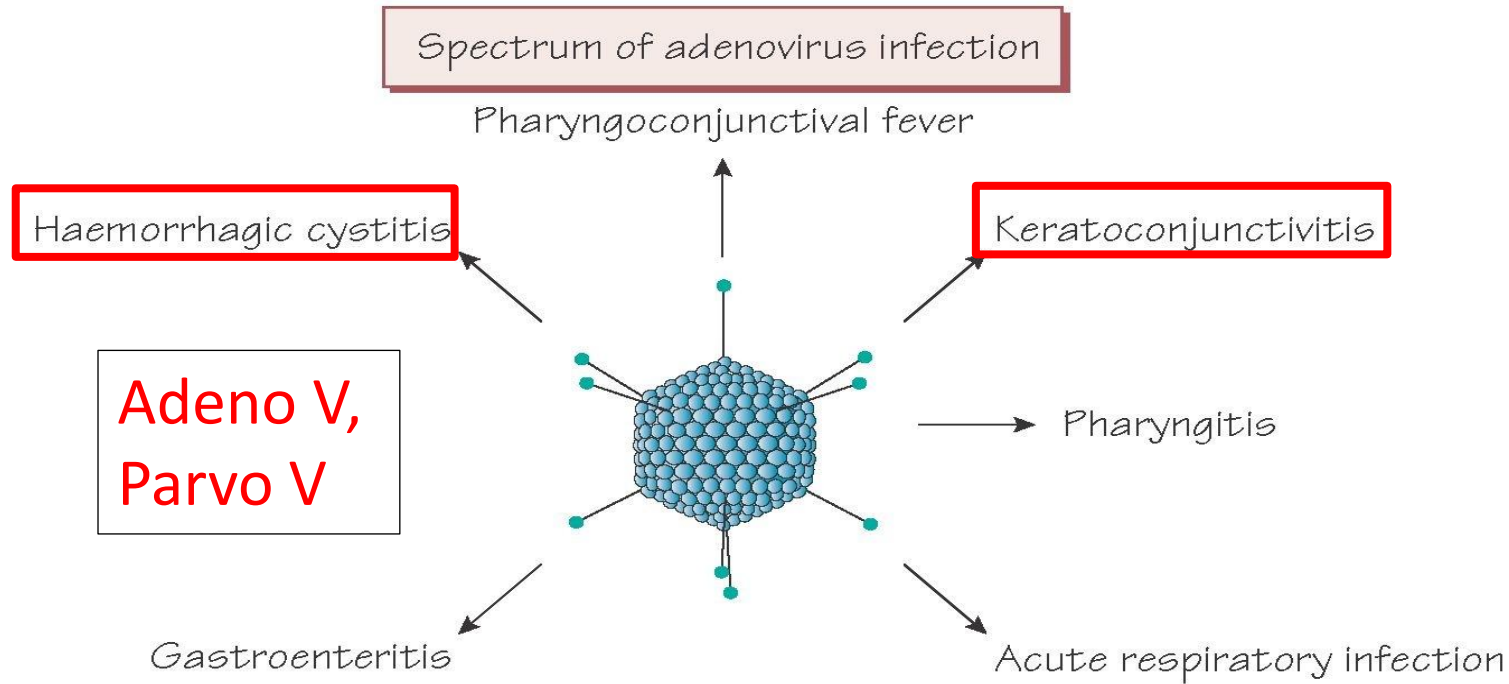
Rubella

Specimens

- Serum

Diagnosis

- Serology (IgM)



Adenovirus

Specimens

- Nasopharyngeal
- Eye exudates
- Stool
- Urine
- Biopsy

Diagnosis

- Immunofluorescence
- NAAT
- EM
- Culture
- EIA

Parvovirus

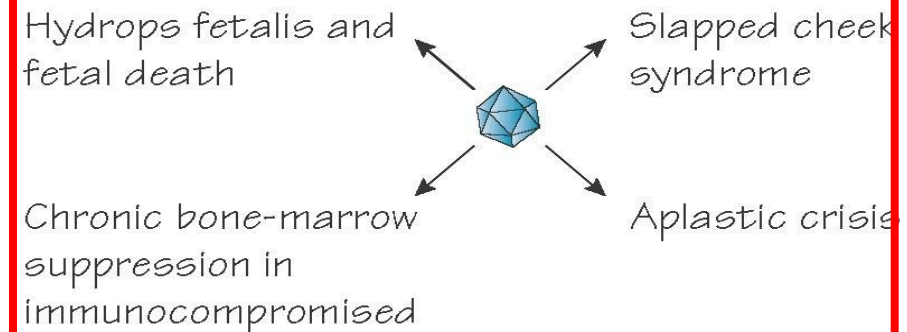
Specimens

- Blood
- Cord blood
- Nasal/throat washings
- Amniotic fluid

Diagnosis

- NAAT
- EM
- Hybridization

Spectrum of parvovirus infection



Fifth disease

Thanks!

The word "Thanks!" is written in a brown, cursive script. It is decorated with two green leaves at the top, three small orange flowers to the right, and one teal flower with a brown center at the bottom left. Small orange dots are scattered around the teal flower.

