

# Classic Childhood Exanthems

Although vaccines are available for some of these childhood illnesses, don't be surprised if you encounter them in your practice—especially among those who have newly arrived from overseas.

**Match the diagnosis to the photo by letter**

- a. Exanthem subitum, roseola infantum
- b. Measles
- c. Erythema infectiosum
- d. Scarlet fever
- e. Rubella



1. After an incubation period of 4 to 21 days, the classic symptoms of malaise, fever, and red "slapped" cheeks appear, signaling that the child is no longer infectious. Four to 14 days after the onset of symptoms, a pruritic lacy rash covers the entire body, preferentially on the extensor surfaces.



2. Incubation (10 to 15 d) is followed by rhinorrhea, sore throat, and conjunctival redness, then high fever. Cervical, postauricular, or occipital lymphadenopathy may develop. Within 5 days, the fever abates; a rash (tiny, erythematous papules on the trunk, neck, and extremities) occurs in about 20% of patients.



3. The rash begins as discrete macules (red spots) on the face that spread to the neck, trunk, and extremities. The hallmark is the generalized tender lymphadenopathy involving all nodes, which is most prevalent at the manifestation of the exanthem but may precede it by a week. The tenderness subsides rapidly, but the enlargement may last days or weeks.



4. Following fever, cough, coryza, conjunctivitis, and whitish spots on the buccal mucosa, the rash appears on day 3 to 7 and lasts up to a week. It begins on the face before generalizing. An infected person is contagious from 5 d before manifestation until 4 d after.



5. This boy has a fever, sore throat, and a sandpaper rash on his trunk. The erythematous eruption is increasingly dense around both axillae. Slight exudate is visible in the posterior pharynx. The anterior cervical lymph nodes are mildly tender but not enlarged.

For the correct answers, go to [www.clinicianreviews.com/articles/picture-this.html](http://www.clinicianreviews.com/articles/picture-this.html).

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