

Patient Information: Henoch Schonlein Purpura

Your child has been diagnosed with Henoch-Schonlein Purpura (HSP), a condition that can affect children of any age, but is most common in those between 2 and 8 years old. HSP is a type of vasculitis, meaning it causes inflammation in some of the small blood vessels, typically in the skin, gut, and kidneys. While the exact cause is unknown, it often occurs in the autumn or spring, following a viral infection or during cold weather. Currently, there is no known way to prevent HSP.

Your child may have the following symptoms:

- A skin rash called "purpura," where spots don't fade when pressed, caused by small blood vessel leaks in the skin.
- Tummy pain, resulting from inflammation of small blood vessels in the gut.
- Blood in the urine, due to inflammation in the kidneys' blood vessels. This can range from traces detected in a urine test to visible blood.
- Joint pain, particularly in the knees or ankles.
- Blood in the stool.

HSP is not contagious.

Most children with HSP recover fully.

Serious kidney issues are uncommon.

- Rarely, the bowel may fold onto itself, causing a blockage that might need urgent treatment or, in rare cases, surgery.
- Your doctor will provide guidance on monitoring for complications and offer a follow-up plan to manage them.

If you are concerned, please contact the
Emergency Department you first attended:

Mercy University
Hospital
(021) 4271971

M-UCC
(St. Mary's
Health
Campus)
(021) 4926900

CUH
(021) 4920200

Local Injury Unit
Mallow General
Hospital
(022) 58506

Local Injury Unit
Bantry General
Hospital
(027) 52900



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Treatment:

There is no specific treatment for HSP, but medicines can help manage symptoms.

- Your doctor may recommend pain relievers like paracetamol and ibuprofen for tummy and joint pain.
- In some cases, the doctor might prescribe steroids like prednisolone to help with severe tummy or joint pain.

Follow up:

HSP requires regular follow-up for at least 6 months, and in some cases, yearly check-ups may be necessary for life. The doctor will provide a follow-up plan tailored to your child's needs.

Return to the ED if:

- Your child has visible blood in the urine.
- Your GP recommends an ED visit.
- Your child has severe pain (tummy, joints, or genitalia).
- You are concerned.

Content compiled by [Dr Najam Iqbal](#) , April 2025

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