



Henoch Schönlein Purpura (HSP)

This leaflet explains what HSP is, how it will affect your child and how it is managed. If you have any concerns or questions, please ask your doctor or nurse.

What is HSP?

Henoch Schönlein Purpura (HSP) is a condition which causes the small blood vessels to become inflamed. This inflammation is called vasculitis. It particularly affects the blood vessels in the skin to cause a rash called purpura. It also commonly affects the blood vessels in the kidneys, intestines and the joints to cause the common symptoms of HSP.

What are the causes?

It is not known why these blood vessels get inflamed but it may be triggered by a recent viral or bacterial infection. HSP can happen at any age but is most common in the 2-10 years age group. It affects boys more than girls.

HSP is not contagious.

Signs and symptoms of HSP

- **Skin** HSP causes a typical rash. This looks like bleeding points or bruises under the skin and they don't disappear when they are pressed with a glass. It is usually worse on the legs and buttocks. Sometimes, when the rash first starts, it can look like urticaria (nettle sting rash).
- **Joints** HSP causes swelling and pain of the joints, usually the knees and ankles. Sometimes, the skin on the back of the hands and feet can also get swollen and tender.
- Abdominal pain The inflamed blood vessels can cause abdominal (tummy) pain.
 Occasionally, there can be bleeding and you must inform your doctor if there is any blood in the child's faeces (poo). Abdominal pain is usually mild and settles with simple painkiller medicine. If the abdominal pain is very severe, the child must see a doctor.
- **Kidneys** Your doctor will know if there is a problem with your kidneys by testing a urine sample and looking for blood or protein. The child's blood pressure will also be checked. Serious problems with the kidneys are uncommon but it is important to monitor this. Your GP and the hospital will keep testing this over the next 6-12 months.

What is the treatment for HSP?

There is no specific treatment for HSP and symptoms usually settle on their own over about 6 weeks. One third of patients will have recurrence of symptoms.

Joint and abdominal pain is managed with simple painkillers like paracetamol. Ibuprofen can be taken if the kidneys are not affected (monitored through regular urine tests). In very severe cases, steroids may be prescribed.

Managing your child's HSP

Your doctor will need to monitor your child's urine and blood pressure over the next year.

Minor changes are common and usually settle without a lasting problem. Serious kidney involvement with HSP is uncommon – but most patients will show a problem with their kidneys in the first 3 months after being diagnosed with HSP.

Abdominal pain usually settles with paracetamol. In very severe cases your doctor may recommend using steroid medicines.

If you child develops acute abdominal pain, severe joint pain, passes blood in their urine or stops passing urine, bring them to the Children's Emergency Department (A&E).

Contacting us

If you require any further advice please contact:

CAT 7 on 0118 322 7531 or email rbb-tr.cat7@nhs.net – please note, this is not for urgent problems.

Further information

Henoch Schönlein Purpura Support Group https://www.facebook.com/hspandourfamily National Kidney Federation https://www.kidney.org.uk/ Helpline: 0800 169 09 36

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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