

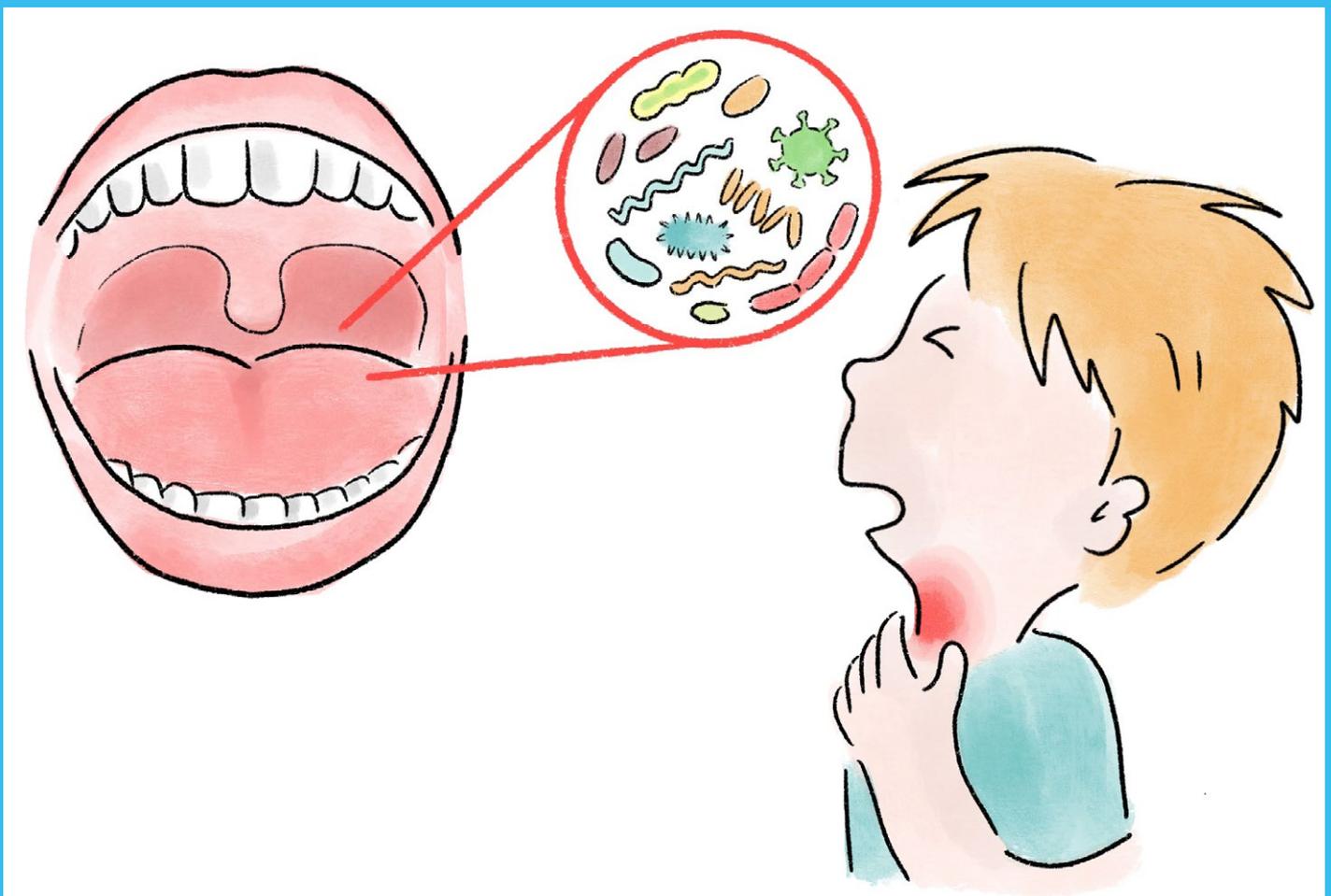
Sore Throat

Information for parents and carers

Key facts

Sore throats commonly occur with or following a cold, which makes the throat and tonsils sore, red and inflamed.

- Very common in winter months
- Usually affects children and young people
- Most cases are caused by a virus



Symptoms often seen with Sore Throat



Headache



Coughing



High temperature



Nausea



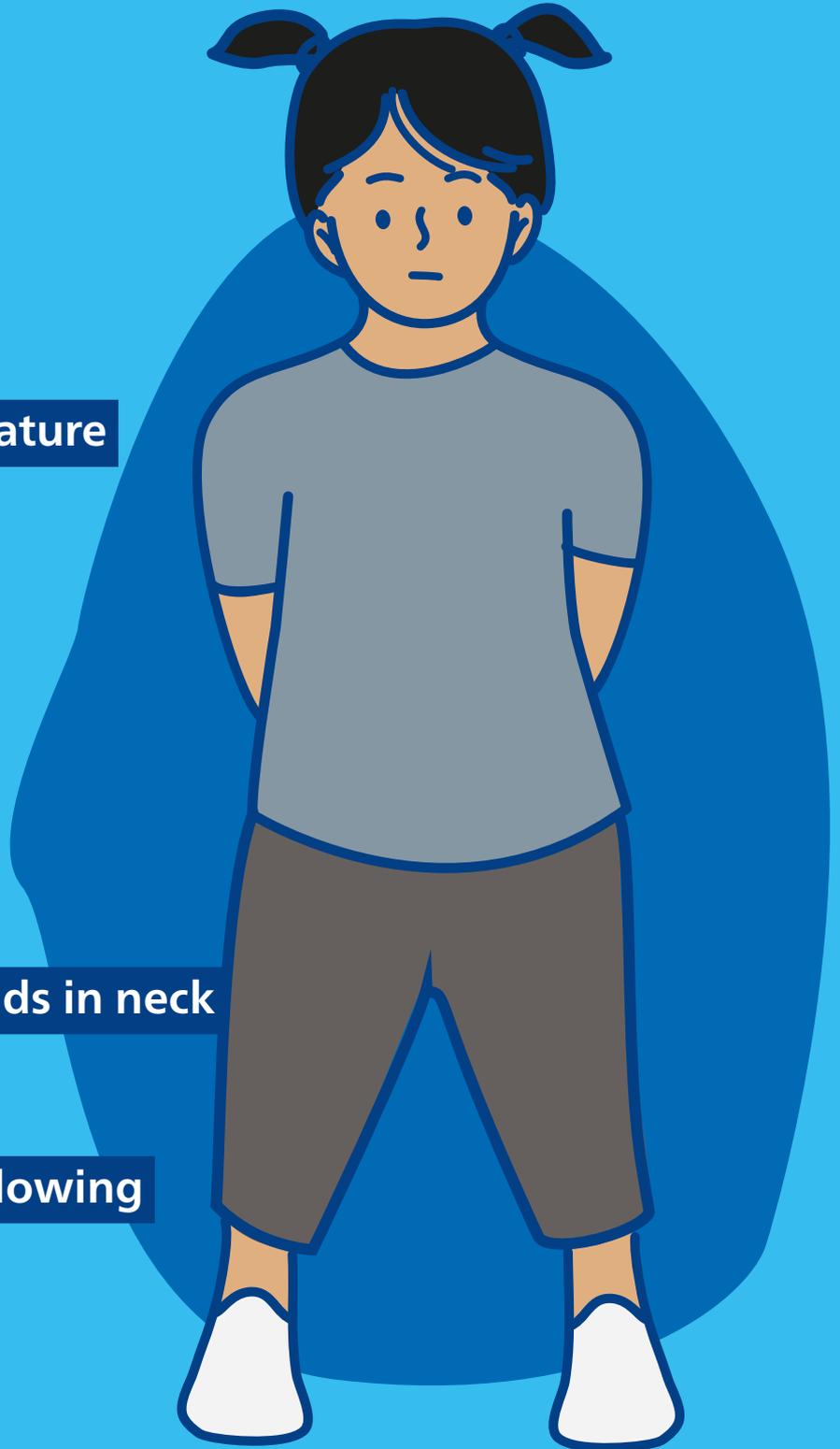
Tiredness



Swollen glands in neck



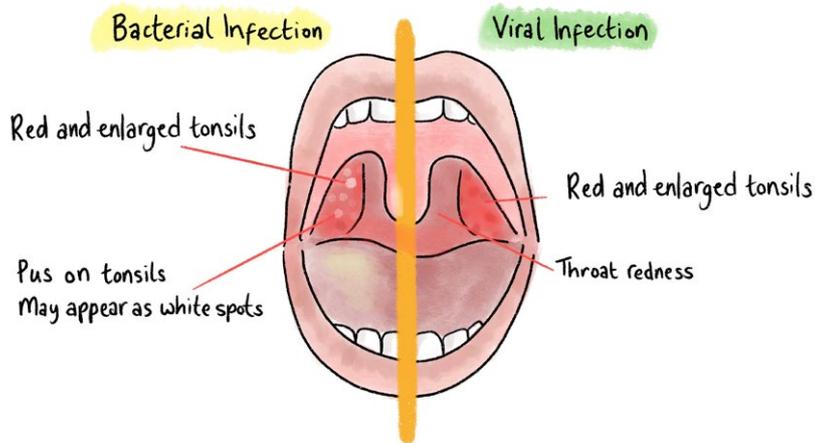
Pain on swallowing



Tonsillitis

Tonsillitis is an infection of tonsils

Symptoms are similar to a sore throat but may be more severe.



What are tonsils?

Tonsils are areas of tissue on both sides of the throat, at the back of the mouth. They are part of the body's defence against infection. You have two tonsils, one on either side at the back of the mouth.

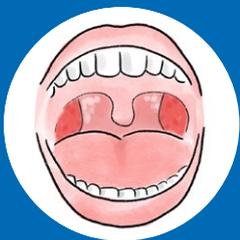


Sore throat

The most common symptoms



Feel unwell



Red and enlarged tonsils



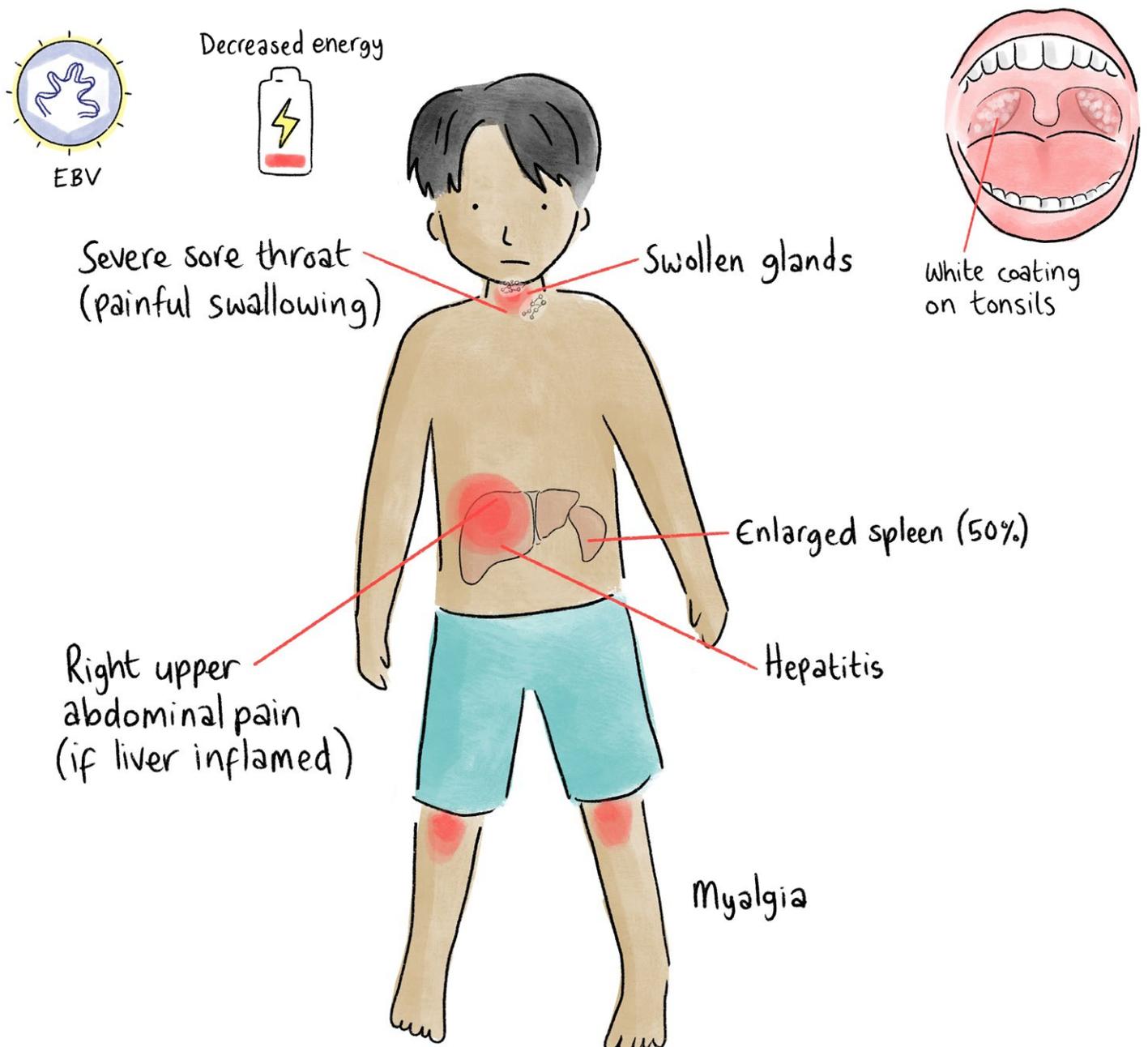
Pus on tonsils

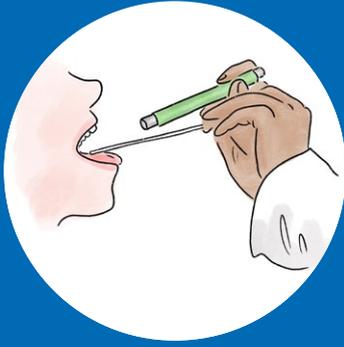
May appear as white spots

Glandular fever

Glandular fever is a viral infection caused by the Epstein-Barr virus. This can affect any age but is most common in young people.

- Suspected when tonsillitis is severe
- Swallowing is often painful
- Swollen glands; any gland in the body can be affected, usually the ones in the neck are most prominent
- Tiredness – this is often the last symptom to go
- Splenic enlargement – can sometimes be felt below the ribs

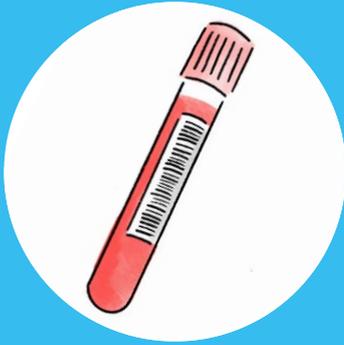




How is it diagnosed?

You will be asked questions about your child's symptoms. The clinician will look in your child's throat.

Most of the time further tests are not needed.



If glandular fever is suspected, bloods can be done to confirm the diagnosis.

Caring for your child at home

If your child does not have any red or amber symptoms in the traffic light advice then you can care for your child at home.

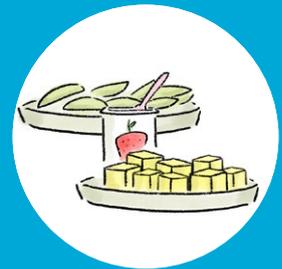
If your child is already taking medicines or inhalers, you should carry on using these. Most sore throats get better without any specific treatment.

If your child has a sore throat, you can help them by doing the following:

- 1** Give your child smaller amounts of fluid, more often



- 2** Many children refuse to eat. This is not a problem, as long as they stay hydrated. Offer small snacks



- 3** Ensure they get plenty of rest



- 4** Benzydamine spray is a local anti-inflammatory treatment that can help soothe a sore throat

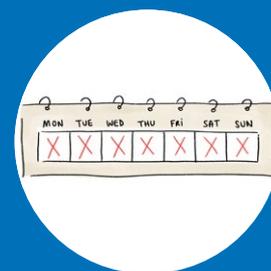


5 If your child is in pain or distressed and over 3 months old, you can give them liquid paracetamol or ibuprofen

At home, we do not recommend giving paracetamol and ibuprofen at the same time. If your child has not improved after two to three hours you may want to give them the other medicine. Never exceed the dose on the packaging.



6 It is very important to continue the whole course of antibiotics even if your child seems better



Make sure your child is never exposed to tobacco smoke. Passive smoking can seriously damage children's health. It can make breathing problems worse.

Remember, smoke remains on your clothes when you smoke anywhere, including outside.





Treatments

Most sore throats clear up within two to three days and don't need any specific treatment

Antibiotics aren't routinely used to treat sore throats, this is because the infection usually clears within three days on its own and antibiotics often make no difference to the speed of this. Although they may occasionally be prescribed if symptoms persist or are particularly severe. Antibiotics can get rid of 'friendly bacteria' from the gut, which can temporarily upset the bowels. Overuse of antibiotics encourages resistant bugs to breed.

Antibiotics are more likely to be prescribed if your child



has pus on the tonsils



has tender lymph glands in the neck



does not have a cough



has a high temperature



not easing after a few days



It is common for a doctor to advise a 'wait and see' approach for three days, in most cases the infection does clear. However, if it doesn't clear then antibiotics may be advised.

What to keep in your medicine cabinet

Keep the following items in your medicine cabinet ready for when you need them;

- Liquid Paracetamol (e.g. Calpol)
- Liquid Ibuprofen – please note that if your child has been diagnosed with Asthma, Ibuprofen is not recommended unless discussed with your doctor first.

Never exceed the maximum dose for paracetamol and ibuprofen in any 24-hour period. Keep a diary of when you give each dose so that you do not give your child too much.

Please check the use-by dates and keep out of reach of children. These medicines are all available over the counter from a pharmacist. The pharmacy or supermarket own brands are cheaper and work just as well, if you are unsure, ask your pharmacist.



Children can change quickly and if at any time your child displays any of the 'Red' features in the box below you should seek EMERGENCY HELP.



RED

If your child

- Has blue lips
- Becomes pale, mottled and feels abnormally cold to touch
- Is struggling to breathe
- Has a fit/seizure
- Becomes extremely agitated – crying inconsolably despite distraction, confused or very lethargic (difficult to wake)
- Develops a rash that does not disappear with pressure (the 'glass test')
- Is under 3 months of age with a temperature of 38°C or above (unless the fever is 48 hours following a vaccination and no other red or amber features)
- Severe sore throat which rapidly worsens
- Swelling inside the mouth or throat
- Difficulty swallowing fluids or drooling
- Child is having difficulty opening their mouth

**YOU NEED EMERGENCY HELP
CALL 999**

**You need to be seen at the
hospital Emergency Department**



AMBER

If your child has any one of these features

- Appears to be getting worse or if you are worried
- Restless or irritable
- Increased difficulty breathing
- Temperature of >39°C despite paracetamol and/or ibuprofen
- Continues to have a fever of 38°C or above for 5 days or more
- Reduced fluid intake by half usual amount
- Passed urine less than twice in 12 hours
- Has extreme shivering or complains or muscle pains
- Vomiting

SEEK MEDICAL ADVICE TODAY

Please call your GP surgery, or, if it is closed call NHS 111

Your GP may want to speak to you on the phone first to give you medical advice. They will arrange to see your child if it is appropriate.



GREEN

If none of the features in the red or amber boxes above are present

See 'Important things to consider' box

SELF-CARE

Using the advice on this leaflet you can care for your child at home.

The most important advice is to keep your child well hydrated.

If you feel you need more advice, please contact your local pharmacy, Health Visitor or GP surgery.

You can also call NHS 111 for advice.

Important factors to consider

There are important factors to consider that may affect your child's ability to cope with a sore throat. These are if your child:

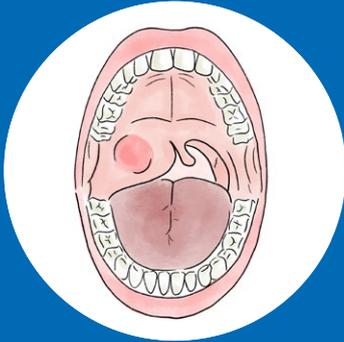
- was a premature baby
- has a heart problem
- or any other pre-existing medical condition that may affect their ability to cope with illness
- is less than 12 weeks old
- has a problem with their immune system

We recommend that in these circumstances you seek medical advice

Complications

Most of the time a sore throat or tonsillitis clears up without leaving any problems.

Sometimes the infection can spread from the throat to other nearby areas which can lead to ear, sinus or chest infections.



Quinsy is an uncommon condition where a collection of pus (an abscess) develops next to the tonsil.

- It may follow tonsillitis or develop without tonsillitis.
- The tonsil on the affected side is pushed towards the middle by the abscess.
- It is very painful and can make you feel very unwell.
- It is treated with antibiotics and the abscess often needs to be drained with a small operation.

You should seek medical advice if

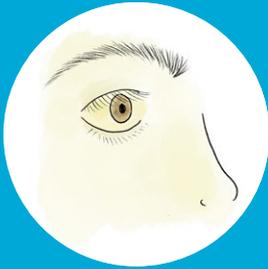
- Becomes suddenly or significantly more ill
- Has an illness which seems severe to you
- Does not improve over three days
- Has a temperature above 39°C
- Develops any symptoms that you are not sure about
- Difficulty eating and drinking due to the pain
- Symptoms mostly on one side of the throat

Glandular fever

Most people with glandular fever do not have complications.



The spleen can be more delicate than normal, if there is an injury during this time it could lead to damage to the spleen. To be cautious, you can avoid contact sports for 8 weeks after having glandular fever.



In about 1 in 10 young adults, it can cause mild inflammation of the liver, rarely this leads to yellowing of the skin (jaundice). Usually this clears up without any treatment.



It is usual to feel tired for the duration of the illness, in some people this can last for longer periods of time.

Tips for Managing Fatigue



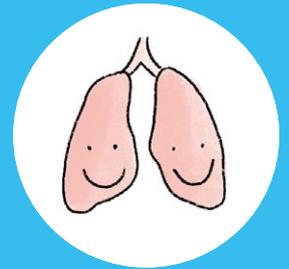
Eat healthy foods



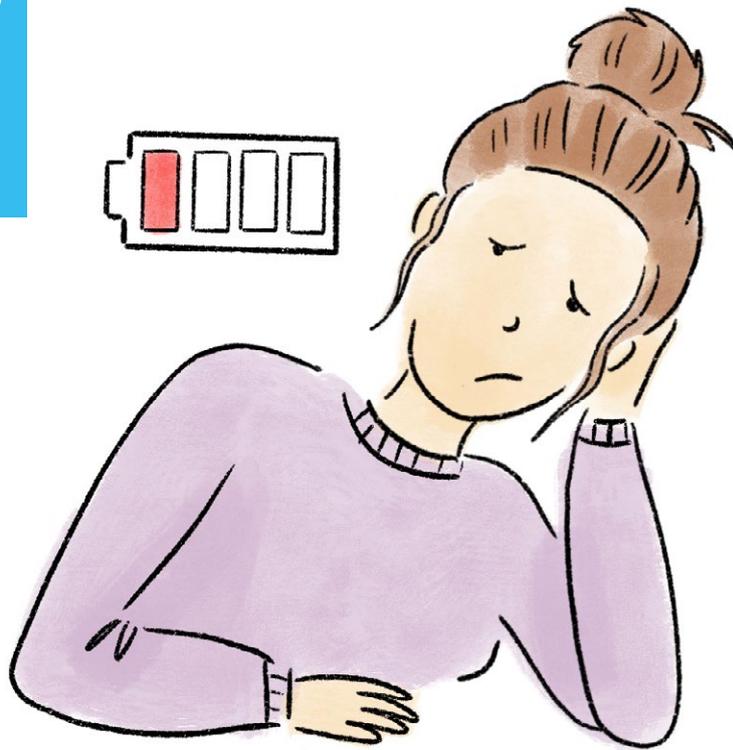
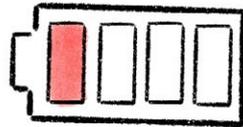
Get enough sleep



Exercise regularly



Breathing techniques



Meditate



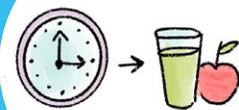
Spend time in nature



Get crafty



Avoid known stressors



Routine



Surgery to remove tonsils

There are some situations when it is recommended to have your tonsils removed, these include:

- has had seven or more episodes of tonsillitis in the last year
- Five or more episodes in the last two years
- Three or more episodes in the last three years
- AND three episodes have affected normal life, e.g. needing time off school

If your child is having frequency episodes of tonsillitis it is important to discuss this with your GP.