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Sore throat

Discharge and self care advice

Information for children, parents and carers



Royal Aberdeen Children's Hospital

Go to your nearest hospital Emergency Department (A&E) or call 999 if your child develops any of the following:

- Has blue lips
- Becomes pale, mottled, or has very cold hands and feet
- Becomes too breathless to talk or eat
- Has a fit or seizure
- Becomes confused, is difficult to wake, or cries continuously
- Develops a rash that does not disappear when pressed on with a clear glass
- Cannot swallow their own saliva
- Develops harsh or noisy breathing when they take a breath in

If you need to contact the Emergency Department for advice following a deterioration, please call

 01224 552041

Where can I get more information?

There is more information about what to expect and when to seek further help on the NHS Inform website:

 **www.nhsinform.scot**

When should I seek further help?

Contact your own GP (or call 111 to speak to NHS 24 overnight / at the weekend) if your child develops any of the following:

- Has difficulty opening their mouth
- Is having breathing problems such as shortness of breath, rapid or laboured breathing, or drawing in of the skin over the ribs when they are breathing
- Seems dehydrated (sunken eyes, drowsy, or not passed urine for 12 hours)
- Becomes excessively sleepy or irritable (especially if they don't improve after a dose of paracetamol or ibuprofen to bring down a fever)
- Has extreme shivering or complains of muscle pain
- Has a fever above 38C every day for more than 5 days
- Is getting worse or you are worried

If your child has any of the symptoms listed on the inside front cover of this leaflet, go to your nearest Emergency Department (A&E) or call 999.

About sore throats

Sore throat is a very common cause of illness in children and young people. The medical name for the throat is the pharynx, and if the throat is inflamed it is called **pharyngitis**.

Tonsils are the small prominent glands on either side of the throat, and if these are inflamed it is called **tonsillitis**.

We know that in children under 5 years old, the most likely cause of their sore throat is a viral infection.

These are very common, particularly in winter months.

Children may also have other symptoms of viral infections such as a runny nose or a cough.

Less often, sore throats are caused by bacterial infection. The most common type of bacteria that causes sore throats is called Group A Streptococcus, so we call this infection **Strep throat**.

What are the common symptoms of tonsillitis and pharyngitis?

- Sore throat
- Pain when swallowing or talking
- Fever
- Swollen and red tonsils
- Occasional plaques on the tonsils
- Swollen and tender lumps in the neck

Do you need to do any tests?

The doctor / nurse may have chosen to send throat swabs to test for the virus or bacteria that may be causing the symptoms. The test takes roughly 2 days to give a result. The results of the test can be used to guide treatments.

How do you treat tonsillitis and pharyngitis?

Although the symptoms of tonsillitis or pharyngitis can be unpleasant, most infections resolve and get better within one week. Following the simple steps below will make your child more comfortable:

- Allow your child to rest at home until they feel better.
- Encourage them to drink plenty of fluid regularly. Cold drinks and ice lollies are a good way to get them to drink as they also help soothe the pain.
- Give paracetamol or ibuprofen for pain or high temperatures. Follow the instructions on the bottle or box to give the correct dose.
- You can buy throat spray to help ease the pain. Ask your pharmacist for advice.

Do antibiotics help?

As viral infections are the most likely cause of sore throats, we do not routinely start antibiotics as they will not be effective or change the duration of symptoms.

Prescribing antibiotics when they are not required risks unpleasant side effects such as diarrhoea, vomiting or rashes.

It can also increase the risk of developing antibiotic resistant bacteria, meaning future infections may be more difficult to treat.

If your child was prescribed antibiotics, this is because the clinician thought they had a higher than normal chance of a bacterial infection or their throat swab has shown a positive result.

Your child will need to take these regularly as prescribed for 5 to 10 days, depending on the type of antibiotic. You should always complete the course given.