



8945 Ridge Avenue  
Suite 3 - 4 - 5  
Philadelphia, PA 19128  
215-483-8558  
andorrapediatrics.com

## What to do when your child has a sore throat

### What causes a sore throat?

**Viruses:** Viruses are a common cause of infections in children. Sore throats and upper respiratory infections (URI), such as the common cold, are the most common illnesses caused by a virus. . The sore throat caused by a cold virus is usually better after a few days.

**Group A Streptococci:** A bacterial cause of sore throat in children is due to a group of bacteria called streptococci. Streptococcal infection of the throat ("Strep throat") is most common in children between the ages of 4 and 12. Children with Strep throat usually have a fever, swollen tonsils, tender glands in the neck, headache, abdominal pain, and sometimes a rash.

**Scarlet fever** (also caused by Streptococci bacteria) is a Strep throat infection and a rash on the face and upper body. The rash is described as a sandpaper rash (fine raised bumps) and is a very faint red color. Scarlet fever is no more serious than a Strep throat infection. Do not confuse Scarlet fever with Rheumatic fever (see below).

Strep throat infections are more common in the winter or spring. Many children with uncomplicated Strep throat infections get better in several days without antibiotic treatment.

### How does a virus cause a sore throat?

Most URI's cause extra mucus production. This mucus drains out of the sinuses and drips down your child's throat (called a post nasal drip). This post nasal drip can cause a very uncomfortable sore throat and coughing.

Stuffy noses, which tend to be worse at night because of the dry heat in most homes, results in increased mouth breathing while asleep. This causes increased dryness and soreness of the throat when your child first wakes up. As the day progresses and your child drinks more fluids and the stuffy nose drains, the sore throat complaints will lessen.

### When should my child see a doctor?

Call if your child has a severe sore throat, sore throat with high fever; whitish yellow pus on the tonsils; swollen and tender glands in the neck; or a red, rough, sandpaper-like rash. Strep throat does not always cause severe symptoms. Call if your child's sore throat continues more than 4-5 days.

If your child has a brief sore throat as part of a cold, but no fever (>101 degrees), Group A Strep throat

infection is less likely.

We are always available to check your child for a Group A Strep throat infection.

### **Is a throat culture necessary?**

A throat culture and a rapid antigen detection test are used to determine whether a throat infection is caused by Group A Streptococcus, a bacterial infection.

Both the throat culture and the rapid test are easy to perform. Using 2 cotton throat swabs, the doctor/nurse takes a sample from the back of your child's throat and tonsils. One sample is then tested for a Group A Streptococcus infection using the rapid antigen detection test. This is done in the office and takes about 10 minutes.

A positive test means your child has a Group A Strep throat infection. A negative rapid strep test usually means that your child does not have a Group A Strep infection. In some early Group A Strep throat infections, the rapid strep test may be negative. In order to pick up these "early" strep throat infections, the second throat swab (taken from your child's throat) is sent to the lab to also test for a strep infection. This throat culture test requires 48 hours to determine if strep is present.

### **When should my child be treated with an antibiotic?**

Antibiotics are only effective for treating bacterial infections such as a Group A Strep throat infection. Antibiotics are not effective against infections caused by viruses such as the common cold. Most sore throats are caused by viruses and therefore do not need antibiotic treatment.

It is not necessary to treat every sore throat immediately. Even in the case where your child may have a Group A Strep throat infection, waiting several days allows your child's immune system to produce antibodies against this Group A Strep bacteria. These antibodies help lessen future Group A Strep throat infections.

Positive rapid strep tests or positive throat cultures are treated with antibiotics for 10 days. If the rapid strep test is negative and your child is sick, an antibiotic may be started until the throat culture results are complete. If the culture is negative after 48 hours, the antibiotic will then be stopped.

### **Why are Group A Strep throat infections treated?**

The main reason for treating a strep throat infection is to prevent Rheumatic Fever (heart disease). This complication is rare and does not occur until several weeks after a Group A Strep throat infection. Therefore, it is safe to wait a few days to see if your child continues to complain of a sore throat.

### **What can I do to help my child?**

There are several ways to reduce sore throat discomfort. Tylenol, Motrin/Advil, throat lozenges and throat sprays (chloraseptic) may provide relief. A sore throat caused by a post nasal drip may be relieved by giving Sudafed. Sudafed is a decongestant, which provides relief by lessening the post nasal drip and clearing the nasal passage so your child will breathe more comfortably. Antibiotics, Sudafed and Tylenol/Motrin/Advil can be given at that same time.

**How often should the medicine be given?**

If the medicine prescribed is taken 3 times/day, give the first dose before school, the second dose after school, and the third dose four hours after the second dose. Medicines prescribed twice/day can be given at breakfast and at dinner. Be sure to complete the full course of antibiotic prescribed, even though your child will feel better in 24-48 hours.

**When can my child return to school or daycare?**

Strep throat is no longer contagious once the antibiotic has been taken for 24 hours. Once your child has completed one day of the antibiotic prescribed, has no fever (<101 degrees), and is feeling better, he/she may return to school or daycare.

This information should not be used as substitute for the medical care and advice of your child's physician. Health related topics found on the Andorra Pediatrics web site should not be used for diagnosing purposes or be substituted for medical advice. As with any new or ongoing treatment, always consult your professional healthcare provider before making any changes in treatment or beginning any new treatment. If you have any questions or concerns, please call our office.