

Where **kids** come first

Ow! I have a sore throat!

Sore throats and tonsillitis



Hôpital de Montréal
pour enfants

Centre universitaire
de santé McGill



Montreal Children's
Hospital

McGill University
Health Centre

The common cold and other respiratory viruses cause most sore throats and tonsillitis. 'Sore throat' is a more general term and 'tonsillitis' is an anatomic term referring to inflammation of the tonsils. In most viral infections, the tonsils, as well as the rest of the throat, are inflamed.

A sore throat caused by a virus usually has other associated symptoms such as a runny nose and cough. If your child is suffering from a common cold or other respiratory virus, it usually lasts three to five days, and occasionally one to two weeks. You should give your child fluids to prevent dehydration, and acetaminophen (Tempra[®], Atasol[®] or Tylenol[®]) or ibuprofen (Advil[®] or Motrin[®]) to treat pain and fever that is higher than 38.8°C. Avoid using expensive throat sprays or throat lozenges which may contain ingredients that can cause adverse drug reactions.

We no longer recommend over-the-counter cough and cold syrups. You can give your child (older than 12 months) one tablespoon of honey periodically to soothe a sore throat. Honey has also been shown to prevent coughing.

What are the signs of tonsillitis?

Tonsillitis, which is an inflammation of the tonsils, is sometimes caused by bacteria such as streptococcus. In this case, particularly in older children, the primary symptoms are a very sore throat and difficulty swallowing without the associated symptoms of a viral infection. It can occur at any age and is more common in fall and winter. Symptoms include a very sore throat, red tonsils with white spots, tender lymph nodes in the neck, a high fever, a garbled voice and bad breath. Younger children may also complain of a sore stomach.

The main reason for treating a 'strep throat' with antibiotics is to prevent rheumatic fever, which although rare, still occurs. A streptococcal pharyngitis (inflammation of the pharynx) that is not treated may also spread and cause a throat or neck abscess.

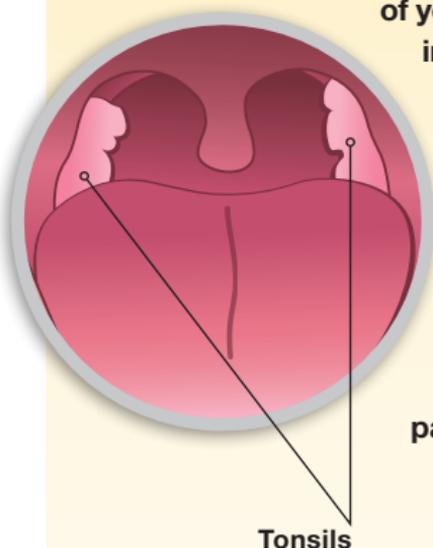
Treating tonsillitis

Your child's physician should do a rapid strep screen and/or throat culture. If the test result is positive, your doctor will prescribe a 10-day course of antibiotics (penicillin/amoxicillin is the drug of choice). Your child will no longer be contagious after 24 hours of antibiotic treatment. It is important that your child take the full 10-day course of treatment, even if they feel better after a couple of days, in order to prevent rheumatic fever. If your child's symptoms get worse, contact your doctor. If your child begins drooling, or has difficulty breathing or swallowing, seek help at a children's hospital emergency room.

If your child has a pharyngeal abscess, an ear nose and throat (ENT) specialist will be consulted who may have to drain the abscess. Recurrent streptococcal pharyngitis, which is rare, may require removal of the tonsils.

What role do tonsils play?

The tonsils and other tissues at the back of your child's throat play an important role in the body's defense against bacterial infections. These tissues form a small part of the immune system. They include the adenoids above the roof of the mouth and behind the nose, the lingual tonsils at the back of the tongue, and two palatine tonsils at the sides.



Tonsils



This information was prepared by the Pediatric Consultation Centre (PCC) at the Montreal Children's Hospital of the McGill University Health Centre.

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