Strep Throat, Child

Strep throat is an infection of the throat caused by a germ (*bacteria*). When the streptococcal germs cause this infection, it is called strep throat. **Strep throat is *contagious*** (your child caught it from someone and can pass it to others). Children usually get strep between the ages of 5 years and 15 years of age. It is uncommon under the age of 2 years unless a sibling also has strep.

SYMPTOMS

Your child may have the following symptoms:

- Sore throat.
- Fever.
- Chills
- Difficulty swallowing.
- Headache.
- Lack of appetite.
- No energy.
- Stomach ache.
- Pink rash that feels like sandpaper.
- Tender glands in the neck.
- Vomiting.

DIAGNOSIS

Diagnosis of strep throat is made either by:

- A culture for the strep germ.
- A rapid screening test.

TREATMENT

Your caregiver will treat strep throat with medicine that kills germs (*antibiotics*). Antibiotics may be given by mouth or by a shot. Antibiotics are medicines that kill bacteria. It is important to complete all of the medicine as it is prescribed to avoid any complications even if your child feels better. Symptoms usually improve within 24 to 48 hours of starting antibiotics.

Never give your child someone else's antibiotics as it may not be effective or they may have unexpected side-effects. Immediate treatment for strep (within a day or two of symptoms appearing) is not necessary and should wait until a caregiver has made the correct diagnosis.

HOME CARE INSTRUCTIONS

- Do not share drinking cups or kiss on the lips while your child has strep as it is contagious by contact with saliva. Everyone in the household should wash their hands well.
- If your child is old enough to gargle, have the child gargle with 1 teaspoon of salt in 1 cup of warm water, 3 to 4 times per day. Have them spit the salt water out after gargling.
- A liquid or soft food diet may be necessary while the throat is sore. Children may eat solid food when they can. Fluids are important to prevent *dehydration* (body not having enough fluids or water).
- Have your child rest and get plenty of sleep.
- Family members with a sore throat or fever may need a medical examination and/or tests.
- Give medicine as directed by your caregiver. Only give your child over-the-counter or prescription medicines for pain, discomfort or fever as directed by your caregiver.
- **Do not give aspirin to children because of the association with Reye's Syndrome.**
- Be sure to finish all antibiotics even if your child is feeling well.

SEEK MEDICAL CARE IF:

- Your child does not feel better or still has a fever after 72 hours of antibiotics.
- Your child develops a rash, cough or earache.
- Your child coughs up green, yellow-brown, or bloody sputum.
- Your child is unable or will not take the antibiotic.
- Your child has an oral temperature above 102° F (38.9° C).
- Your baby is older than 3 months with a rectal temperature of 100.5º F (38.1° C) or higher for more than 1 day.

- Your child's urine turns dark brown colored or there is blood present.

SEEK IMMEDIATE MEDICAL CARE IF:

- Your child develops any new symptoms such as vomiting, severe headache, stiff or painful neck, chest pain, shortness of breath, trouble breathing or swallowing.
- Your child has difficulty opening their mouth.
- Your child has severe throat pain, drooling or changes in voice.
- Your child becomes increasingly sleepy, is unable to wake up completely or becomes irritable.
- Your child develops swelling of the neck, or the skin on the neck becomes red and tender.
- Your child becomes dehydrated. Signs of this include:
  - No urination for 6 to 8 hours.
  - Inactivity or decreased alertness.
  - Appears weak or limp.
  - Sunken eyes.
  - Muscle cramps.
  - Very dry mouth. Mouth may look "sticky" inside.
  - Deep, rapid breathing.
- Your child has an oral temperature above 102° F (38.9° C), not controlled by medicine.
- Your baby is older than 3 months with a rectal temperature of 102º F (38.9º C) or higher.
- **Your baby is 3 months old or younger with a rectal temperature of 100.4º F (38º C) or higher.**

Document Released: 09/27/2006 Document Re-Released: 03/14/2011
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