Fever

Tomar Antibióticos
No es un juego

Región de Murcia
Consejería de Salud

Servicio Murciano de Salud
What is fever?

Fever is not a disease; it is just an increase in body temperature beyond its normal values. **Fever is the defence mechanism of our body against germs.** When it appears, it means that there is something wrong with our body. Although it normally accompanies infectious diseases, fever can be caused by other reasons. For example: newborn children can have an increased body temperature if we wrap them up warm too much.

**We should keep in mind that:**

- Most of fever infections are caused by viruses, so they do **NOT need to be treated with antibiotics.**
- Infections causing fever (regardless of its gravity) may not have early symptoms, and the physical examination in the first hours of the disease can be normal (this is called **fever without a focus**).
- It is not rare that a fever infection appears without other symptoms and then disappears without knowing its origin.

There is no relation between the degree of a fever and the severity of the infection, except in very young children.

- Antipyretic medicines do not cure infections; they just help children feel better.
Types of thermometers:

- **Digital**: They are the most advisable. They take the reading in 1-2 minutes and, normally, they inform us with an acoustic signal.

- **Gallium**: They are similar to mercury thermometers (which are no longer marketed because of its environmental toxicity). They are reliable, although they need up to 4 minutes to take the reading.

- **Tympanic or otic**: The reading is taken in the ear, immediately. Although they are also very accurate, their results can be uncertain under some conditions.

- **Strip thermometers**: They are placed on the forehead. They are easy to use, but are usually unreliable.

Measurement locations:

- **Armpit** is the most advisable.

- **Rectal** and **ear** temperatures are normally 0.5°C beyond axillary temperature.
**When can it be considered fever?**

**Feverishness:** Axillary temperature between 37.3 and 37.9°C.

**Fever:** When axillary temperature exceeds 38°C.

Before going to the Health Centre or Emergency Department, make sure the child has a fever.

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**What should be done to control fever?**

Fever does not need to be lowered in all circumstances, only if the child is feeling bad. That is the case, normally, with temperatures beyond 38°-38.5°C. Measures to be taken are as follows:

- **In case of feverishness:** Axillary temperature: 37.3 and 37.9°C.

  Under these conditions, we will take the following measures:
  - Child should not wear warm clothes (just wear nappy or a light pyjama).
  - Keep the room cool and well-ventilated, avoiding airflow.
  - Give them enough water, without forcing them.
  - Do not rub alcohol on them.
• **In case of fever:** Axillary temperature beyond 38°C.

We will follow the measures for feverishness together with **antipyretic medicines** (which treat fever), with the appropriate dose according to type of medicine and the child’s weight.

It is recommended to use just one type of antipyretic. The most used in paediatrics are:

- **Paracetamol:** This is the preferred treatment as it has less side effects. Medicines with paracetamol used in paediatrics are oral solutions, suppositories or orodispersible tablets, for older children.

- **Ibuprofen:** It is used in cases of high fever or when paracetamol is not enough. We can have ibuprofen in oral suspension.

- **Metamizole:** It will only be used as an alternative measure if the paediatrician or the emergency doctor prescribes it. It is available in oral drops.

**You must use the recommended dose by your paediatrician, and respect times, avoiding taking medicines although fever reappears.**

**DO NOT EVER USE ANTIBIOTICS** if your paediatrician does not prescribe it.

**Viruses do NOT respond to antibiotics.** Using antibiotics indiscriminately and in an unjustified way is the main cause for bacteria to become resistant, so infection treatment become more difficult due to a loss of efficiency of antibiotics. Antibiotics resistance can affect anyone.
When should we consider fever as an emergency?

Warning signs.

- In children younger than 3 months.
- In children older than 3 months who present one or several of the following symptoms:
  - Temperature higher than 40°C.
  - Convulsions.
  - An important lack of energy, especially if it lasts after a temperature drop below 37.5°C.
  - Significant drowsiness, dizziness or abnormal behaviour.
  - Important vomits, headaches or irritability.
  - Stiff neck (they cannot bend the head).
- Skin eruptions or spots. **Petechiae** are red spots that do **NOT disappear when stretching the skin around them**. Vomits and repeated cough can cause petechiae in face and upper part of thorax, and they are not alarming. If they appear in other parts of the body or, more importantly, if there is a lack of energy, you must visit your paediatrician as soon as possible in order to rule out severe infections with rapid progression.

- Breathing disorders.

- If the child suffers from a chronic serious disease. If any of these **signs** appears, you must go to the nearest Health Centre. If it is not possible, you must control fever until you can visit your paediatrician.
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