

STREP THROAT INFECTION

Strep throat is caused by an infection with a bacteria. It can only be diagnosed with a throat culture or rapid strep test.

The treatment of strep throat can prevent some rare but serious complications such as rheumatic fever (a disease that affects the heart) or spread of the strep infection to other areas of the body. In addition, with treatment the fever and much of the sore throat are usually gone within 24 hours.

TREATMENT-

- Antibiotics – These are drugs used to kill bacteria. Liquid or tablet forms are available. Try not to forget any of the doses. If the medicine is a liquid, store the antibiotic at the recommended temperature and use a medication measurer to be sure that you give the right amount. Your child should take the medicine until all doses are finished. Even though your child will feel better in a few days, give all the antibiotic doses to keep the strep throat from flaring up again.

A long-acting penicillin (Bicillin) injection is another option if your child refuses oral medicines or if it will be impossible for you to give the oral medicine regularly. If taken correctly, the oral penicillin works just as rapidly and effectively as a shot.

- Local pain relief – Children over age 6 to 8 years can gargle warm saltwater (1/4 teaspoon of salt per cup). Swollen tonsils can make some foods hard to swallow. Provide your child with a diet of soft foods for a few days if he prefers it. Avoid salty or citrus foods. Give your child acetaminophen (Tylenol) or ibuprofen (Motrin, Advil) if he has a fever over 102 degrees F (39 degrees C) or a great deal of throat discomfort.

CONTAGIOUSNESS

Your child is no longer contagious after he has taken the antibiotic for 24 hours. Therefore, your child can return to school after one day if he is feeling better.

THROAT CULTURES FOR THE FAMILY

Strep throat can spread to others in the family. Any child or adult who lives in your home and has fever, sore throat, headache, or vomiting in the next week should be evaluated. In most homes only the people who are sick need throat cultures. (In families where relatives have had rheumatic fever, or frequent strep infections, everyone may need a throat culture).

FOLLOW-UP VISIT

Repeat cultures are not necessary if your child takes all of the antibiotic and feels better.

CALL OUR OFFICE IMMEDIATELY IF:

- Your child starts drooling.
- It becomes very difficult for your child to swallow.
- The fever lasts over 48 hours after your child starts taking medicine.
- You feel your child is getting worse.

RECURRENT STREP THROAT

Some children get strep throat many times. Although the reason for repeated strep throat infections is poorly understood, we do know that it is NOT because the bacteria are resistant to the antibiotic medicine prescribed. Please be SURE to give all the doses of the medicine so it can do its job and get rid of the strep completely.

The most likely reason for the recurrence is re-infection from another person. That is, a whole new infection starts after the previous one is cured. In fact, one theory supposes that certain individuals are genetically more susceptible to strep and catch it more easily.

Another theory proposes that some of the bacteria normally present in the throat help the strep to survive by inactivating the antibiotic drug. We may change drugs to address this possibility.

Certain people can be carriers of strep throat. A carrier is someone who has the strep germ in the throat but is NOT SICK. A carrier is diagnosed when a culture is positive even though the person is well. This presents a problem for the carrier, because every sore throat will have a positive culture- even when it is not a strep throat and is caused by a virus. Thus, when a child has many positive throat cultures, we will often check to see if he or she is a carrier. If this is the case, special medication may be used to try to rid the child of the strep.

Carriers rarely pass on the infection to others. We will sometimes check all the family members to see if we can find a source.

Family pets are generally not a source of strep. While family members should not share toothbrushes, a person with strep does not need to discard his own. Let it dry thoroughly after use.

TONSILLECTOMY

If we have addressed all of the possibilities listed above and your child continues to get strep throat, a tonsillectomy may be recommended. Removing the tonsils greatly reduces (but does not eliminate) the chances of getting strep throat. Tonsillectomy is performed by an ear nose and throat specialist under general anesthesia.