# Fever in children

#### SELF CARE FORUM FACT SHEET NO. 4

A high temperature, or fever is very common in children. It is the way the body responds to any number of infections both minor and serious. Fever could be a symptom of many different conditions. This fact sheet is designed to tell you what to look for, when you should be concerned and when to seek help.

### **Useful facts**

**What is fever?** Fever is a raised body temperature above the normal daily variation, which usually suggests an underlying infection. A high temperature is 38°C or higher.

**Fever is common** Around 3 out of 10 preschool children will develop one or more episode of fever every year.

**Fever is often normal** Mild feverish illness is a normal part of childhood – a natural, healthy and harmless response by the immune system to help the body fight infection.

**Common causes** Causes of fever include the common cold, ear infections, stomach bugs (gastroenteritis), throat and travel related infections.

**Serious causes** In rare cases, severe infections, such as pneumonia or meningitis, are the main cause of a fever.

**Children under 6 months** A child under 6 months of age with a fever must be assessed by a health professional.

## What can I expect to happen?

In most cases, a fever is caused by a common, selflimiting (improves by itself) viral illness which gets better by itself. Your child is unlikely to need antibiotics.

**Duration**: A fever should not last longer than 5 days. Your child is unlikely to be seriously unwell if they:

- **Behaviour**: Respond normally to you, seem content, wake easily and stay awake and has a normal cry
- **Hydration**: Have moist lips and tongue and normal skin and eves
- **Skin colour**: Their skin and tongue are their usual colour
- Other signs: Have none of the signs and symptoms listed in the sections on "when to seek medical help."

Rarely, more serious medical problems may cause fever in children. Always speak to 111 (or NHS24 in Scotland / Phone First Service in NI) or to your child's GP if their health gets worse or if you have concerns about looking after your child at home. Your pharmacist can also help with advice.

### **Treatment**

Remember that you can ask a member of your pharmacy team for advice.

**Medication** You can give either paracetamol or ibuprofen if your child is unwell or appears distressed.

Neither should be given routinely just to reduce body temperature or to prevent fits.

If you've given paracetamol and they still have a high temperature after 1 hour, you could try giving them ibuprofen. If this helps to bring down their temperature carry on giving them ibuprofen instead of paracetamol. Do not continue alternating without advice. See your doctor if you've tried both paracetamol and ibuprofen and they have not helped.

Always follow the manufacturer's instructions.

- Do not give paracetamol to a child under 2 months.
- Do not give ibuprofen to a child under 3 months or under 5kg or to children with asthma.
- Never give Aspirin to children under 16.



## What can I do to help myself now and in the future?

Checking your child's temperature if you have a thermometer: Under 4 weeks old, use an electronic thermometer in the armpit. In children aged between 4 weeks and 5 years, use an electronic or chemical dot thermometer in their armpit, or an infra-red tympanic (ear) thermometer in the ear canal.

**If you haven't got a thermometer**, does your child feels abnormally hot and therefore a high temperature? Your child might feel hotter than usual to the touch on the forehead, back or tummy, and might be sweaty or clammy or has red cheeks.

**Clothing** Avoid over, or under-dressing your feverish child.

**Heating and cooling** Keep the room well ventilated and the heating down. Tepid sponging of children is not recommended.

**Fluids** Encourage your child to drink small sips of fluid, regularly. If you're breastfeeding, offer as many feeds as they will take.

**School or nursery** It is best to keep feverish children away from nursery or school.

**Body checks** Check your child 2-3 times at night for signs of serious illness (see red boxes below).

Make sure your child is up to date with their vaccinations. Let a health professional know if vaccinations are missing or delayed.

## When to seek help

Call your child's surgery, 111 in England and Wales, the Phone First Service in NI or NHS24 in Scotland NOW if your child has any of these:

- High fever If your child is 3-6 months old and has a temperature of 38°C or more or you think they have a high temperature.
- Vomiting Your child vomits repeatedly, or brings up dark-green vomit.
- Skin colour Your child's skin, lips or tongue are pale
- Rash You notice a new rash that fades when a clear tumbler is pressed against it.
- Behaviour Your child does not respond, wakes with difficulty, is less active, doesn't smile or feed poorly or is not their usual self and you are worried.
- **Breathing** Your child breathes much faster than usual and their nostrils flare.
- Hydration Your child is not drinking and not passing much urine. Nappies stay dry, their mouth and eyes appear dry.
- Duration Your child's fever has persisted for 5 or more days.
- Other signs Your child also can't walk for some reason, has developed a swelling or new lump in a limb or joint or has attacks of shivering or you notice any other unusual symptoms and signs that you can't explain, or your child is less well than when you previously sought advice.

Go to A&E if your child has a temperature and any of these symptoms:

**High fever** If your child is 3 months or less and has a temperature of 38°C or more or you think they have a high temperature.

**Skin colour** Your child's skin, lips or tongue are mottled, ashen, pale or blue.

**Behaviour** Your child does not respond, does not wake, or falls asleep again if woken or has a high pitched or continuous cry or is very agitated or confused.

**Breathing** Your child breathes much faster than usual, makes a grunting sound when they are breathing, and the skin between the ribs or the area just below the rib cage moves in and out during breaths.

**Hydration** If your child has a dry mouth, if you pinch the skin on the back of your child's hand and it does not return to normal quickly or, in babies, the soft spot on the top of the head (the fontanelle) is sunken or bulges.

**Rash** You notice a new rash that does not fade on pressure (press a tumbler against the rash to see if it disappears). **Other signs** Your child has a stiff neck, is bothered by light, has cold hands or feet or has had a fit or seizure for the first time (can't stop shaking).

### Where to find out more

Below are NHS website links in your country, or speak to a pharmacist, who can help you assess your child's symptoms:

- NHS England:
- NHS Inform, Scotland:
- NHS111 Wales:
- NI Direct, Northern Ireland:
- NHS Website Taking paracetamol

