

## **Stop fever phobia to reduce antibiotic prescribing in children and unnecessary GP consultations and pediatric admissions.**

Parents lack confidence to care for their feverish child, due to the following two myths that are maintained by health professionals:

1. that fevers can get too high and you die
2. that when the fever gets too high this can result in a febrile convulsion.

Reiterate to the parent that fevers cannot get too high and febrile convulsions, usually happen with a sudden rise in the temperature.

Explain the fever process. "Running a temperature is like running a distance": heart rate is up, the breathing is faster and the child is lethargic, lying on the sofa. As such the "laboured breathing" that parents notice, is due to the body exerting itself to raise its temperature. During this fever process the body is heating itself up from the head and chest into the hands and feet.

In summary:

1. Physiological fever temperatures cannot get too high
2. Febrile convulsion do not happen "when the temperature get too high" but in general come out of the blue: when there is a sudden rise from a normal body temperature
3. Running a temperature is like running a distance: the heart rate is up and the breathing is quicker and the child will be listless until the body has managed to heat itself up into the hands and into the feet: after which the temp goes down and the child perks up again and will be running around the house until, often 4pm in the afternoon the temp goes up again and often also 11 pm at night, when the parent wants to go to bed...
4. Keep checking for meningeal signs (sitting upright and looking down) and non-blanching rash (anywhere on the body) to rule out a dangerous underlying bacterial illness - in which case the parent dials 999
5. Review with GP if fever episodes happen over more than 5 days
6. Review with a urine sample if the temperature is constantly over 39 for 24 hours rather than an up and down pattern, to check for a urine infection.
7. Children under 6 months best seen by GP anyway when having a fever and children under 3 months to be seen by the pediatrician.
8. Paracetamol and Ibuprofen are painkillers and "read the NICE discharge advice leaflet: no need to treat the fever, use analgesics for pain control (earache, throat ache etc). do not use ibuprofen when the child might be a bit dehydrated as they might end up with kidney failure and needing dialysis due to Ibuprofen damaging the kidneys.

Havinga W. Time to counter'fever phobia'!. Br J Gen Pract. 2003 Mar 1;53(488):253-.

Havinga W. NICE guidelines on fever in children. Br J Gen Pract. 2007 Oct 1;57(543):835-.

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