



FEVER

What is fever?

Human body temperatures vary with the time of the day. In general, we all have different body temperatures based on our different biorhythms and activity levels. Infants tend to have higher body temperatures than children and adults. What temperature qualifies as a fever depends on the method you use to measure the temperature. A rectal temperature under 100.5°F or an oral temperature under 99.5°F is considered normal. The data on axillary (under the arm) temperatures is variable. In general, an axillary temperature should be regarded like an oral temperature, under 99.5°F is considered normal. Ear thermometers are often unreliable in children. In order for an ear thermometer to register correctly, the laser ray needs to hit the eardrum. In most children, the ear canal curves making the likelihood of a straight path to the eardrum unlikely.

Many people believe that since their children "run low" with normal body temperature, fevers occur for them at a lower threshold temperature. This is not true. Fever is determined regardless of a person's baseline body temperature.

What does a fever indicate?

Fever occurs when the white blood cells (infection fighting cells) in the body respond to an infection. Fever is actually a by-product of the reaction of the white blood cells fighting off a virus or bacteria. Fevers can occur with both viral and bacterial infections. Not all infections will produce fevers. In addition, you cannot determine if an infection is viral or bacterial by the height of the fever.

When should you worry about a fever?

Fever in children can be scary for parents, especially when the temperatures are high. The point at which you should worry depends on the age of your child and the other symptoms that they are having. An immediate call to the pediatrician is necessary if a child under the age of 2 months develops a rectal fever over 100.4°F. For infants between 2 months and 6 months of age, you should contact your pediatrician for temperatures over 103°F. For immunized, older infants and children, we worry more about the reason for the fever than the actual temperature. If a child has a high fever, but remains happy and playful, then we worry less because the child is coping well with the fever and the underlying illness. You should always contact us about a child with fever and any of the following symptoms: lethargy, twitching, inconsolability, stiff neck, swollen joints, breathing difficulty or a red/purple rash. In addition, if a child is acting ill or has had a fever for longer than 3-5 days, we should see them in the office to determine if there is a treatable cause for the fever.

When is a fever too high?

A high body temperature can actually damage cells in the body at 106°F. Therefore, we want you to contact us whenever your child's temperature is over 105°F. At that point, we can determine whether your child needs to be seen or if it is reasonable to watch him or her as long as the temperature comes down.

What is the best way to treat a fever?

In children over 6 mos, fever is not harmful unless it is over 106°F. The main reason to treat a fever is because it makes children feel uncomfortable. Both acetaminophen (Tylenol) and ibuprofen (Children's Motrin or Children's Advil) can be used to bring down a fever. Some children respond better to one medication or another. It is

important to choose one type of medication rather than alternating the two. Tylenol can be given every 4 hours, but not more often than 5 times in 24 hours. Ibuprofen can be given every 6 hours. Both types of medications should be dosed according to your child's weight rather than age. Aspirin should not be used in children to treat fevers. Also, rapid temperature change can be harmful, avoid cold baths and alcohol wipe downs.

For question regarding proper medication dosing you can visit the “Is Your Child Sick” section on our website at www.springdalemasonpediatrics.com