Goals and Objectives

• Answer questions the audience has about pharyngitis........
• New thoughts on Pharyngitis....

First Question

• “It’s cold season, child comes in for sore throat, culture is done and positive......in light of 1 in 5 children being a ‘carriers‘ are we over treating?” (When and how to use Centor/McIsaac criteria vs. clinical judgment.?)

New Recommendations

• Infectious Disease Society (2012)
  – Don’t test if you think it’s a virus
  – Don’t treat unless you have a +RADT or + culture
  – Don’t do confirmatory culture in adults
  – Use PCN or Amoxicillin
     • If allergic—but not anaphylaxis use 1st generation cephalosporin
     • If PCN anaphylaxis-- use macrolide or clindamycin
Follow up Questions

- Why do we treat strep?
- Other infections we should treat?

Antibiotics in Sore Throat

- Group A β hemolytic strep
  - Prevent suppuritive complications
  - Prevent Rheumatic Fever
- Gonorrhea
  - Prevent disseminated GC
  - Prevent spread
- Fusobacterium necrophorum

Second Question

- “Thoughts on azithromycin in light of growing azithromycin resistance?”

Third Question

- “I heard that infants can’t get strep. Is this true???”
Streptococcosis
- <3 years of age
- Low grade fever
- Tender adenopathy
- Nasal congestion/discharge

Fourth Question
- “What are other disease can mimic pharyngitis?”

Other diagnosis to consider
- Infectious Mononucleosis
- Acute Retroviral Syndrome
- Herpangia
- Herpes stomatitis
- Ludwig’s Angina

Mononucleosis
Clinical features of infectious mononucleosis in younger and older age groups

<table>
<thead>
<tr>
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<th>Patients, percent</th>
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<tbody>
<tr>
<td></td>
<td>≤35 years</td>
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<tr>
<td>Lymphadenopathy</td>
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<td>Pharyngitis</td>
<td>84</td>
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<tr>
<td>Fever</td>
<td>75</td>
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<tr>
<td>Splenomegaly</td>
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<td>Hepatomegaly</td>
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<tr>
<td>Rash</td>
<td>10</td>
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<td>Jaundice</td>
<td>9</td>
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Herpangina

Ludwig’s Angina

Fifth Question

• “When should I use steroids in patients with strep throat?”

Symptomatic Treatment

• Not steroids.....
• NSAID’s>Acetominophen
• Salt water gargles
• Ambroxol and lidocaine lozenges
• Benzocaine lozenges
• Oral rinse with equal parts lidocaine, diphenhydramine and Maalox
Sixth and Last Question

• “What are your thoughts on those who are proponents of no antibiotics for pharyngitis?”

Just say “NO”

• Europeans don’t treat with antibiotics
• Penicillin anaphylaxis in 0.015%
  — Fatality rate 0.002%
• Morbidity from 10 days of antibiotics
  — 10%???
• Incidence of ARF after GABHS
  — 0.00002% in developed countries
  — Much higher in developing countries
• Outbreaks of ARF have occurred—rheumatogenic strains