
SELF-CARE INFORMATION ON GLANDULAR FEVER

What is glandular fever?

Glandular fever is caused by a virus known as Epstein-Barr Virus (EBV). It also is known as the 'kissing disease'. Glandular fever is common amongst young adults; however, it can affect any age group.

This virus is found in the saliva of infected people and can be spread through:

- Kissing – glandular fever is often referred to as the "kissing disease"
- Exposure to coughs and sneezes
- Sharing eating and drinking utensils, such as cups, glasses and unwashed cutlery

EBV may be found in the saliva of someone who has had glandular fever for several months after their symptoms pass, and some people may continue to have the virus in their saliva on and off for years. If you have EBV, it's a good idea to take steps to avoid infecting others while you are ill, such as not kissing other people, but there's no need to avoid all contact with others as the chances of passing on the infection are generally low.

What are the symptoms?

The infection can present in several different ways. The main symptoms may include:

- High fever
- Excessive fatigue (tiredness)
- Sore throat
- Enlarged lymph glands in the neck, groin, and armpits
- Swollen ulcerated tonsils.

Glandular fever can also cause:

- A general sense of feeling unwell
- Aching muscles
- Chills
- Sweats
- Loss of appetite
- Pain around or behind your eyes
- The inside of your throat to become very red and ooze fluid
- Small red or purple spots on the roof of your mouth
- A rash
- Swelling or "puffiness" around your eyes

- A tender or swollen tummy
- Jaundice (yellowing of the skin and whites of the eyes)

What are the risks?

A few people may have more persistent symptoms, for example: swollen tonsils (with spots of pus or ulcers), enlarged lymph glands, high fever, pain, severe fatigue (tiredness), and difficulty swallowing - which can lead to dehydration.

It is possible to develop more serious problems from this illness, including hepatitis, unusual liver function, and an enlarged spleen which can lead to the spleen being more vulnerable to trauma.

When to seek medical advice

You should contact your GP if you suspect that you or your child has glandular fever.

While there is little your GP can do in terms of treatment, they can provide advice and support to help you control your symptoms and reduce the risk of passing the infection on to others.

You should go to your local accident and emergency (A&E) department or dial 999 for an ambulance if you have glandular fever and you:

- Develop a rasping breath (stridor) or have any breathing difficulties
- Find swallowing fluids difficult
- Develop intense abdominal pain

These symptoms can be a sign of complications of glandular fever that may need to be treated in hospital.

How glandular fever is diagnosed

To diagnose glandular fever, your GP will first ask about your symptoms before carrying out a physical examination. They will look for characteristic signs of glandular fever, such as swollen glands, tonsils, liver, and spleen.

What will happen if I am admitted to hospital?

Although most people get relatively mild symptoms and can manage things at home, a small proportion of patients are more unwell and may need assessed in hospital. A doctor who will arrange tests to confirm your diagnosis, including a blood test (Mono Spot). Most patients who require admission remain in hospital for one or two days.

You may also be prescribed tablets or an injection to reduce pain or fever. If you are unable to eat or drink, due to a severe sore throat, you may be prescribed IV (intravenous, which means into the vein) fluids to prevent you becoming dehydrated.

What treatment will I receive?

There is no cure for glandular fever, but there are several simple treatments and measures that can help reduce the symptoms while you wait for your body to control the infection.

These include:

- Drinking plenty of fluids
- Taking over-the-counter painkillers, such as paracetamol or ibuprofen
- Getting plenty of rest and gradually increasing your activity as your energy levels improve

Occasionally, antibiotics or corticosteroids may be used if you develop complications of glandular fever.

To aid your recovery also:

- Avoid alcohol. If there is any evidence of liver involvement, do not drink alcohol until your liver function blood tests return to normal. You will have repeat bloods approximately four weeks following diagnosis.
- Avoid rough or contact sports, or any heavy lifting for at least eight weeks, because if your spleen is enlarged, this could cause damage.
- To prevent the spread of glandular fever, avoid kissing or close body contact with other people whilst you are ill.

Prognosis

Most symptoms of glandular fever will usually resolve within two or three weeks. Your throat will normally feel most sore for three to five days after symptoms start before gradually improving, and your fever will usually last 10 to 14 days.

You may experience further episodes of tiredness or weakness; this is normal. This can last up to two months following diagnosis. However, please contact your GP if the lethargy lasts for long, or any further/unusual symptoms develop.

What about school/college/university/work?

There is no formal exclusion required for glandular fever. Return should be done at your own pace once you feel well, this may be done in gradual stages. Often people require two to four weeks away, but this is entirely individual. Speak to your GP if you require any further help with regards to this or need a fit note.

Useful contacts

- Ask your pharmacist
- Patient UK - www.patient.co.uk
- NHS Choices, www.nhs.uk/conditions/

If you have further questions:

Call the **practice** on *01285 653184 or 01285 653122*

If you require **urgent** medical advice, call *111 (24 Hrs)*

In an **emergency** call **999**