Introduction

A fever is defined as the body temperature elevating to a higher-than-normal level.

Causes of fever in children

Fever in children is suggestive of an underlying infection and is the most common symptom of infection in children. Viral infections, such as colds and gastroenteritis, cause increased temperatures, but generally improve without treatment. Bacterial infections, such as urinary tract and ear infections, are also known to result in fever.

Teething has been known to cause mild fever in some children. However, temperatures of 38.9°C or more are unlikely to be precipitated by teething. Some children may present with a fever after routine vaccinations. Temperatures may vary, depending on the vaccine that is given. However, this is not a reason to avoid vaccinating a child.

Taking a child’s temperature

Although feeling the forehead of a child may indicate whether or not the child is feverish, a glass thermometer or digital device should be used to conduct an accurate assessment. The average normal body temperature ranges between 36.4°C and 36.9°C during the day.

There are various ways in which to take a temperature:

- **Rectal temperatures:** Taking a rectal temperature is the most accurate method as it is the closest to a child’s true internal body temperature.
- **Oral temperatures:** Taking an oral temperature is not favoured in young children because they find it difficult to keep their mouths closed around the thermometer in order to obtain an accurate reading. Always use a clean thermometer, and never take a reading in the mouth directly after a child has consumed a hot or cold beverage. In such circumstances, it is necessary to wait at least 30 minutes. Place the thermometer under the child’s tongue for 2-3 minutes.
- **Armpit temperatures:** Taking an armpit temperature is achieved by placing the tip of the thermometer under the child’s armpit. Ensure that the armpit is dry. Hold the thermometer in place for 4-5 minutes.
- **Ear temperatures:** Ear temperatures are taken by using a digital thermometer, but are not as accurate as rectal or oral thermometers. Digital thermometers are unreliable in infants under the age of three months. When taking an ear temperature, gently pull the child’s outer ear backwards and insert the probe into the ear canal for approximately two seconds.

Managing fever in children

When a child has a temperature, it is advisable not to overdress them, but rather to keep them in light, cool clothing. Since fever is the body’s natural immune response to infection, some healthcare professionals advise against treating a fever in a child. Nonetheless, antipyretics reduce fever and can make the child feel better.

Aspirin and paracetamol are effective in reducing fever. However, aspirin is not recommended for children under the age of 16 years. This is because it can cause Reye’s syndrome in children with viral infections. Paracetamol can be given every 6-8 hours, but must not be used for more than a few days consecutively without consulting a doctor or healthcare provider. Ant-inflammatory medicine, such as ibuprofen and mefenamic acid, can also be given. However, it should not be offered to children under three months of age. Ibuprofen has been shown to be as effective as paracetamol and has a longer duration of action. Suppositories can also be used to combat fever and pain, and are the most effective form of medication in children who cannot take the medicine orally. Suppositories can be administered to children as young as three months of age. Administration should be every 6-8 hours, but should also not be given for more than a few days consecutively without consulting a doctor or healthcare provider.

Fever increases the risk of dehydration. Therefore, it is important to encourage the intake of adequate amounts of fluid. If a child is unable to drink fluids for more than a few hours, the parent should consult a doctor or healthcare provider.

Conclusion

There are many ways to measure and reduce a fever. Nevertheless, it is always advisable to consult a doctor or healthcare provider if a parent is concerned about the child’s fever.

Bibliography available on request