

Symptom Management

Fever/Infection

We come to know early that fever signals a problem in the body. So, when our child has a fever, we move quickly to do something to “make it better”. As you continue to care for your child in the best way possible, you will still respond to fever. You may respond differently, however. There are germs around us, on us and in us, all the time. The stronger our immune system, the more likely we are to stay well in spite of their presence. When the immune system weakens, the germs (bacteria, fungus, virus) can more easily grow and multiply. Infections result. Fever signals the effort of the immune system to overcome the infection or, less often, to respond to another problem of some other kind.

The risk of fever increases when the child:

- * has an infection anywhere in the body
- * is having a treatment - radiation therapy, chemotherapy, blood transfusions – where fever is a side effect
- * is drinking very little and becoming dehydrated
- * has a condition that affects the part of the brain that controls body temperature
- * has a disease that affects the blood cells that are part of the immune system
- * has tubes(catheters) or lines (IV etc) placed in the organs or blood vessels – these provide an easy way in for germs.

Watch for these signs of fever

- * temperature greater than 38.5 C. (Ignore this if you have decided not to use a thermometer);
- * shortness of breath;
- * irritability or listlessness;
- * chills;
- * warm forehead with a flushed or pale face;
- * vomiting/diarrhea;
- * sore and/or swelling that does not heal (may not be red and inflamed);
- * sores in the mouth or throat;
- * coughing, runny nose;
- * pain with a bowel movement;
- * deep drowsiness;
- * need to urinate often;
- * rashes.

Fever is a rise in body temperature. Fever may make the person uncomfortable.

It is difficult to prevent fever once the immune system is no longer able to battle against the germs and other present dangers. At the end stages of life, infections may happen quickly and often.

Some fevers cannot be explained.

Should you take the temperature?

Discuss this with your doctor or nurse. It may be more important to rely on these other signs. Taking a temperature may not be worth the discomfort it gives your child. Does knowing the exact temperature make any difference to what you will do to make your child more comfortable?

If you do decide to take a temperature:

- * make sure you know how to take a temperature by mouth or underarm. A thermometer can injure the rectum and increase the risk of infection and bleeding;
- * buy a centigrade thermometer with a digital read out to make things easier.

Preventing fevers/infections

* Prevent infection

Germs enter through the openings to the body - mouth, nose, sores and cuts, bladder and rectum. Germs settle on the skin, stay on one's hands, and then get into an opening. The very best way to prevent infection is to practise good hygiene:

- ◆ wash hands often, brush teeth, and clean the skin;
- ◆ don't share glasses, spoons, towels, etc.;
- ◆ keep your child away from others with infections.

Parent voice:

Whenever my children came home after school or play they went at once to wash their hands.

They washed hands even before coming to say hi to Nicholas or to me. They insisted that their friends do the same when they came to visit.

They also understood how important it was for their friends who had even a little cough or cold to stay away. They would ask them not to come.

We worked with infection control as a family.

* Prevent the fever effect of treatment

Talk to your doctor about making changes to the treatment causing the fever.

* Dehydration

Think about ways to encourage your child to take more fluid.

You cannot prevent the fevers that are part of the child's disease, or the brain's inability to control body temperature.

Discuss with your doctor or nurse how much to push fluid. It may be better to accept the fever.

Managing fever

* Have a plan

With the doctor or nurse write a plan for what to do if your child has a fever. Keep it handy.

* Bring the fever down

- ◆ Dress your child in light clothes and cover with a light blanket.
- ◆ Change bed linens if they are damp from sweat.
- ◆ Bathe the child in lukewarm (not cold) water.
- ◆ Use cool water bottles.
- ◆ Wash her face with a cool cloth.
- ◆ Encourage sips of cool drinks.
- ◆ Give acetaminophen or a medication, if your doctor or nurse has advised it.
- ◆ Keep the lips and mouth moist and clean (see [Personal Hygiene](#) handout).
- ◆ Cool the room or use a fan (unless your child is chilled).

* Reassure and calm your child

You are the most important comfort for your child. Being a calm, reassuring presence will take away her fear and prevent agitation. Hold her hand, hold her in your arms, use a soothing voice. Play music that will relax him.

* Treat the underlying infection

In some children, fever/infection is a part of the dying process. Treatment that contributes very little to comfort may be a poor choice for your child. (Refer to the handout [Critical choices about antibiotics and infections](#))

Fevers caused by infections may be treated with a course of drug therapy. Talk with your doctor and nurse about whether there are benefits in treating an infection during this phase of your child's life.

Use these strategies only if they bring comfort for your child.

Never use aspirin-containing medications.

Parent voice:

When Kim developed pneumonia we knew she was not going to live too many more weeks. We decided not to do another course of IV antibiotics. She had told us she did not want to go back to the hospital. Instead we gave regular acetaminophen for fever and morphine for comfort. I have no regrets about that choice!

Getting professional help when appropriate

Call your doctor or nurse during the day if your usual plan is not working to keep your child comfortable and he:

- * has irritability or restlessness;
- * has vomiting and/or diarrhea;
- * has a sore throat that does not get better;
- * has sores anywhere on the body;
- * has a cough;
- * is unable to drink fluids.

If you have not already decided on a plan, call your doctor or nurse as soon as you can if your child:

- * has a rash;
- * has chills;
- * has pain;
- * is very drowsy, does not respond or wake up;
- * has little or no urine for 6-8 hours;
- * is unable to get enough air.

When you call, give your child's name, age, and diagnosis. Be ready with this information:

1. What is your child's temperature? (Explain if taking a temperature is no longer part of your plan.)
2. What treatments/drugs/therapies has your child had?
3. What other symptoms does your child have?
4. Has your child had acetaminophen (eg. Tylenol) today? What time? What dose?

End note:

As your child's condition gets worse, and he comes closer to the end of his life, you may come to realize that the "tried and true" ways of managing fever/infection aren't working very well anymore. Then, you will need to remind yourself that the focus of your care is not the fever but rather the child.

Take care of your child.
The fever will run its course.

The plan to manage infection:

This pamphlet is the result of a collaboration between
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