

CHILDREN
WITH

oral inflammation



Children with **oral inflammation**

General information:

Oral inflammation is a virus disease. It may be caused by a number of viruses, and in approx. 90 % of the cases, the cause of the inflammation is Herpes Simplex Virus type 1 (HSV-1). Oral inflammation is mostly seen in children aged 2-4. HSV-1 is the same virus as the one that causes cold sores on the lips. Once HSV-1 is in your body, it is not possible to get rid of completely. The virus lies dormant in the body, and, in certain situations, it may react and cause nuisance – for example when the child is subjected to cold or sunshine. The first time the child is attacked by HSV-1, it will typically get an oral inflammation. Subsequently, the child will get cold sores on the lips when the virus causes nuisance. Oral inflammation disappears by itself within 1-2 weeks. In infants, oral inflammation is often caused by fungus.

How is it contracted?

Oral inflammation spreads through the air via spittle. Objects, which the child has touched, such as toys, may also spread the infection.



Symptoms:

- Fever
- After 1-2 days, grey-white blisters in the mouth
- Red and swollen gums, which may bleed
- The blisters will burst and leave sores
- The blisters will spread to the lips and the skin around the mouth
- Swollen glands on the throat
- The child refuses to eat/drink
- The child dribbles and is in pain

Good advice:

- Soft food
- Cold and fresh drinks
- Accept the fact that the child will eat less for a few days. Liquid, however, is important

When to see a doctor?

Contact a doctor if the child:

- refuses to drink and cannot pee
- appears to be weak and is difficult to get in contact with
- makes you worry and you feel insecure

Contact your general practitioner first because he/she knows your child better than the doctor on call. You can also get good advice and guidance from your health visitor.

Treatment:

Treatment is about relieving the symptoms and keeping an eye on the child's condition. You may possibly give the child painkillers as agreed with a doctor.

Prevention:

Prevention is difficult in practice, as the infection is often transmitted in places where children are in close contact with each other. It is important to wash your hands after having touched a sick child. In general, it is important for both children and adults to wash their hands often as studies show that this will reduce the spread of infections.

Childcare:

The child can return to childcare once it no longer dribbles or runs a fever and feels well again.

Parental guidelines

These guidelines have been prepared by a working group set up by the departments of paediatrics in Herning, Randers, Skejby and Viborg.

The intention with these guidelines is to provide parents with advice across the following sectors: health visitors, general practitioners family doctors, doctors on call, and the staff at paediatric admission wards in the Central Denmark Region.

The parental guidelines can be seen and downloaded from the internet on the web site www.fv.rm.dk

You may order additional copies from Rikke Dalsgaard,
Koncern Kvalitet, Central Denmark Region,
Skottenborg 26, 8800 Viborg. rikke.dalsgaard@stab.rm.dk

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