

ACUTE SORE THROAT

90% RESOLVE IN 7 DAYS WITHOUT TREATMENT



15-30% IN CHILDREN AND 10% IN ADULTS CAUSED BY GROUP A BETA-HAEMOLYTIC STREPTOCOCCI (GABHS)

SIGNIFICANT SYMPTOMS/SIGNS

- LYMPHADENOPATHY
 - NO COUGH
 - FEVER
 - EXUDATE



≥3 40% CHANCE OF GABHS AND 1:60 CHANCE OF QUINSY



CONSIDER ANTIBIOTICS

- PHENOXYMETHYLPENICILLIN (10 DAYS)
- CLARITHROMYCIN (5 DAYS)



≤2 80% CHANCE NOT GABHS



CONSIDER SYMPTOM RELIEF
DELAYED ANTIBIOTICS AFTER 3 DAYS

ACUTE INFECTIVE CONJUNCTIVITIS (> 1 MONTH OF AGE)



30-70% BACTERIAL AND RESOLVE WITHOUT TREATMENT WITHIN 1-2 WEEKS

SYMPTOMS/SIGNS

- RED EYE
- MUCOPURENT DISCHARGE
- EYES GLUED TOGETHER BY DISCHARGE AFTER SLEEP
- SYMPTOMS OF URTI
- STARTS IN ONE EYE AND SPREADS TO THE OTHER
- ENLARGED PRE-AURICULAR LYMPH NODE
- CONTACTS



CONSIDER DELAYED ANTIBIOTICS AFTER 3 DAYS

- CHLORAMPHENICOL
- 2ND LINE FUSIDIC ACID 1%

NB: IN CHILDREN NO NEED TO BE OFF SCHOOL/NURSERY UNLESS THERE IS AN OUTBREAK

ACUTE COUGH < 3 WEEKS DUE TO URTI/ACUTE BRONCHITIS

CONSIDER ALTERNATIVE DIAGNOSES IF:

- HAEMOPTYSIS
- INCREASING BREATHLESSNESS
- CHEST PAIN
- PERSISTENT FEVER
- WEIGHT LOSS
- CHANGE IN VOICE
- MALAISE
- CHEST EXAMINATION: INCREASED RESPIRATORY RATE, DULLNESS/BRONCHIAL BREATHING/CREPITATIONS

SYMPTOMS/SIGNS

- WITH/WITHOUT PHLEGM
- MILD FEVER
- CLINICAL EVIDENCE OF RHINITIS/PHARYNGITIS
- CHEST EXAMINATION: NORMAL OR MILD WHEEZE

UPPER RESPIRATORY TRACT INFECTION/ACUTE BRONCHITIS

SIGNIFICANT DISEASE OF:

- KIDNEYS
- LIVER
- HEART
- LUNGS
- NEUROMUSCULAR OR IMMUNOSUPPRESSION OR YOUNG CHILD BORN PREMATURELY

> 80 YEARS OLD AND 1 OR MORE OF:

- HOSPITALISATION IN THE LAST YEAR
- DIABETES
- CCF
- ON ORAL STEROIDS

>65 YEARS OLD AND 2 OR MORE OF:

NO ANTIBIOTICS OR DELAYED COURSE OF ANTIBIOTICS AFTER 2 WEEKS

CONSIDER IMMEDIATE ANTIBIOTICS
• AMOXICILLIN OR DOXYCYCLINE FOR 5 DAYS

ACUTE OTITIS MEDIA (AOM)

60% RESOLVE IN 24 HOURS



80% RESOLVE WITHIN 2-7 DAYS

SIGNIFICANT SYMPTOMS AND SIGNS

- <2 YEARS OLD AND BILATERAL AOM
- OR
- OTORRHOEA
- OR
- <2 YEARS OLD AND BULGING MEMBRANE AND > 4 OF
 - FEVER
 - TUGGING EARS
 - CRYING
 - IRRITABILITY
 - DIFFICULTY SLEEPING
 - LESS PLAYFUL
 - EATING LESS

≥1



CONSIDER IMMEDIATE ANTIBIOTICS

- AMOXICILLIN OR CLARITHROMYCIN (5 DAYS)

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CONSIDER DELAYED ANTIBIOTICS AFTER 3 DAYS

SUSPECTED UNCOMPLICATED LOWER UTI IN WOMEN

SYMPTOMS/SIGNS

- DYSURIA
- FREQUENCY
- SUPRAPUBIC TENDERNESS
- URGENCY
- HAEMATURIA
- NOCTURIA

MILD OR ≤2 SYMPTOMS AND NO VAGINAL DISCHARGE
POSITIVE FOR LEUCOCYTES ONLY



CONSIDER DELAYED ANTIBIOTICS AFTER 48 HOURS, CONSIDER MSU

URINE DIPSTICK
NITRITES OR LEUCOCYTES AND BLOOD POSITIVE



80% CHANCE UTI

SEVERE OR ≥3 SYMPTOMS AND NO VAGINAL DISCHARGE



ORAL ANTIBIOTICS
• NITROFURANTOIN OR TRIMETHOPRIM FOR 3 DAYS

Review Date: December 2014