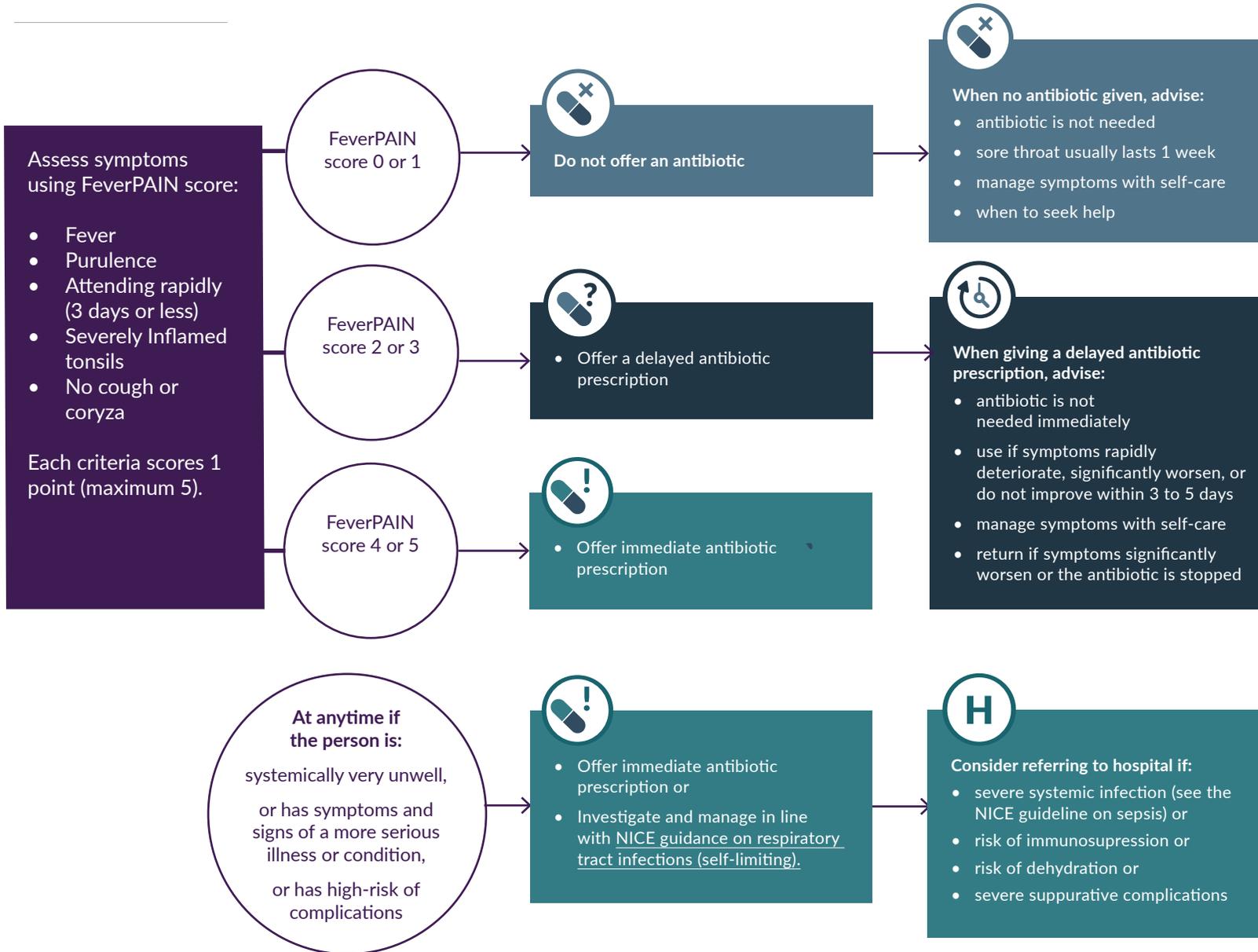


# Sore throat (acute): antimicrobial prescribing



## Self-care

- Consider paracetamol or ibuprofen for pain or fever (for under 5s see the [NICE guideline on fever in under 5s: assessment and initial management](#))
- Some evidence that medicated lozenges can help reduce pain, so people may want to try them
- No evidence for non-medicated lozenges, mouthwashes, or local anaesthetic mouth spray on its own



## Evidence on antibiotics

- Antibiotics make little difference to how long symptoms last or the number of people whose symptoms improve
- Possible adverse effects include diarrhoea and nausea



## Bacterial cause more likely if the FeverPAIN score is higher:

- Score 0 or 1 - 13 to 18% likelihood
- Score 2 or 3 - 34 - 40% likelihood
- Score 4 or 5 - 62 to 65% likelihood

See the full recommendations and why we made them: [www.nice.org.uk](http://www.nice.org.uk)

# Sore throat (acute): antimicrobial prescribing

## Choice of antibiotic: adults aged 18 years and over

Antibiotic <sup>1</sup>	Dosage and course length
First choice	
Penicillin V	500 mg four times a day for 10 days
Alternatives for penicillin allergy or intolerance	
Clarithromycin	250 mg twice a day for 5 days. Increase to 500 mg twice a day in severe infections
Erythromycin (in pregnancy)	250 to 500 mg four times a day for 5 days or 500 to 1000 mg twice a day for 5 days
<sup>1</sup> See BNF for appropriate use and dosing in specific populations, for example, hepatic impairment, renal impairment, pregnancy and breast-feeding	

## Choice of antibiotic: children and young people under 18 years

Antibiotic <sup>1</sup>	Dosage and course length <sup>2</sup>
First choice	
Penicillin V	1 to 11 months: 62.5 mg four times a day for 10 days. Increase if necessary up to 12.5 mg/kg four times a day 1 to 5 years: 125 mg four times a day for 10 days. Increase if necessary up to 12.5 mg/kg four times a day 6 to 11 years: 250 mg four times a day for 10 days. Increase if necessary up to 12.5 mg/kg four times a day 12 to 17 years: 500 mg four times a day for 10 days
Alternatives for penicillin allergy or intolerance	
Clarithromycin	Under 8 kg: 7.5 mg/kg twice a day for 5 days 8 to 11 kg: 62.5 mg twice a day for 5 days 12 to 19 kg: 125 mg twice a day for 5 days 20 to 29 kg: 187.5 mg twice a day for 5 days 30 to 40 kg: 250 mg twice a day for 5 days 12 to 17 years: 250 mg twice a day for 5 days, increasing to 500 mg twice a day for 5 days, if required in severe infections
Erythromycin (in pregnancy)	8 to 17 years <sup>3</sup> : 250 to 500 mg four times a day for 5 days or 500 to 1000 mg twice a day for 5 days
<sup>1</sup> See BNF for children for appropriate use and dosing in specific populations, for example, hepatic impairment and renal impairment. <sup>2</sup> The age bands apply to children of average size and, in practice, the prescriber will use age bands in conjunction with other factors such as the severity of the condition and the child's size in relation to the average size of children of the same age. <sup>3</sup> Dose banding given for age group as in the BNF for children.	