CILARIA ITOWN pediatrics

by Monica Hamburgh, MD



It's no longer called
"the kissing disease"
as mono can spread
by sharing
a water bottle, etc.
just as easily...



Mono:

At Least you only get it once!

Mono, or infectious mononucleosis, causes fever, sore throat and swollen glands, as well as severe fatigue. It is usually caused by a virus called *EBV* (Epstein-Barr Virus), and rarely by other viruses. It cannot be treated with antibiotics. It eventually resolves on its own, but, unfortunately, it can cause severe fatigue and loss of time from school and sports.

Teenagers are usually the ones who get this "kissing disease" – not because you can only get it by kissing (you can get it through any close contact of saliva – sharing cups, utensils, etc.) but because younger kids who get *EBV* usually don't get *mono* symptoms. The peak age to get *mono* is age 15-24. Once you get *EBV* you are immune for life (although you can still get *mono* from these other rare viruses).

Patients with *mono* may get a generally sick feeling, headache, and low-grade fever then gradually sore throat, high fevers, swollen neck glands and fatigue set in. The "sick" feeling may last just 2-3 weeks, but occasionally the fatigue can last for months. With the sore throat, some patients have white or red spots on their throat and tonsils, just like with strep throat, but unlike strep throat, mono cannot be treated by an antibiotic.

In some cases, the sore throat and tonsil swelling is so severe that prednisone by mouth may be prescribed to help reduce the swelling. Another problem that can arise in half of *mono* patients is swelling of the spleen (an organ in the left upper part of the abdomen). This is why we advise NO SPORTS or heavy lifting when a patient has *mono*. If they are accidentally hit in the stomach, especially during the first 3 weeks of illness, their spleen could rupture, which can cause life-threatening internal bleeding! Occasionally rupture can occur spontaneously even without getting hit in the abdomen – any mono patient with sudden, severe abdominal pain needs immediate medical attention!

Patients with mono need lots of rest, fluids and pain/fever control. It is safe to take acetaminophen (*Tylenol*), but follow dosing instructions exactly. Acetaminophen can affect the liver which may already be inflamed from mono. Ibuprofen (*Motrin* or *Advil*) will also be helpful. Never give a child or teenager aspirin as this can cause severe liver problems even if they don't have mono! College patients should be aware that alcohol is very dangerous for people with mono due to liver inflammation, don't drink!

We can test for *mono* in the office using a blood test. The test doesn't pick up everyone with *mono*, so your doctor may diagnose you even if the test was negative. We test for *mono* even though we can't cure it in order to plan what to do next with your child. If your child does have *mono*, they should stay out of school until they have no fever and are feeling better, and stay out of sports for at least 3-4 weeks, depending on what your doctor advises you. Mono is only spread by secretion contact, so careful handwashing. If you are diagnosed with mono, your

	tor will want to see you back in the office for scheduled follow-up visits until yo s your child is better. Your child can resume sports only once your doctor says he	
	he/she should start slowly and gradually.	<i>3,</i> 3110 00
	hope you find our Parentletter helpful and informative. Please keep in mind that receipt of this newslette	
partio	te a doctor/patient relationship and that it is not meant to serve as a substitute for professional medical cular pediatric medical concerns, including decisions about diagnoses, medications and other treatments any questions after reading this newsletter, we encourage you to speak with your child's pediatrician.	
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