

STREPTOCOCCAL PHARYNGITIS



Key Points

Common clinical features of acute Strep pharyngitis:











Cervical lymphadenopathy

Pharyngeal exudate

Fever (>38°C)

No cough/ rhinorrhea

petechiae

3-14 year-olds most susceptible | less common in younger & older

- Avoid unnecessary testing if clinical picture suggests classic viral etiology (eg. presence of cough, rhinorrhea, or hoarseness)
- Keep in mind other **differential diagnoses** for sore throat:
 - Viral pharyngitis (>70%)
 - eg. infectious mononucleosis
 - Life-threatening pharyngeal infections

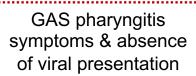


Wait for positive throat culture or rapid antigen detection test before initiating treatment. Goal is to prevent acute rheumatic fever, suppurative complications, & reduce symptom duration.

Pathogens

Group A Streptococcus (S. pyogenes)

Management



















Penicillin V 40 mg/kg/d PO in 2 divided doses × 10 days OR amoxicillin 50 mg/kg/d PO (up to 1 g/d) in 1-2 divided doses × 10 days

Continue supportive care