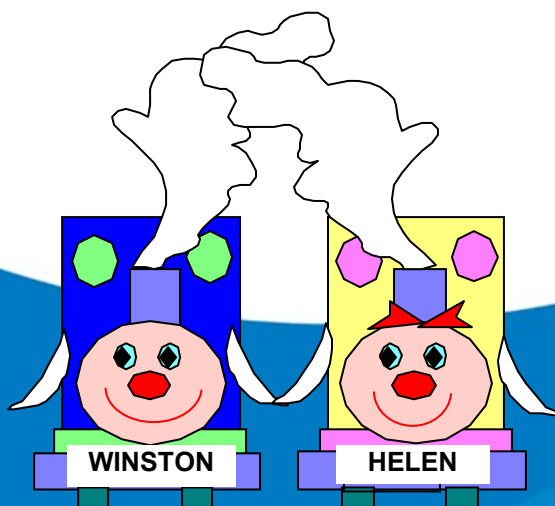


Herpes Stomatitis

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The nature and reasons for the condition

Herpes stomatitis is a viral infection of the mouth which causes blisters and ulcers. It is a contagious infection caused by the herpes simplex virus (HSV). It is possible that an adult member of the family may have a cold sore at the time the child develops herpes stomatitis but often no cause of infection is found.

Sometimes children with herpes stomatitis need to be admitted to hospital for a few days. Your child will be nursed in a cubicle on the ward as this is a contagious infection. You will need to wash and dry your hands before and after handling your child.

Transmission

The virus can be transmitted by salivary transfer by kissing or sharing utensils or towels, if there is contact with mucus membranes or open or abraded skin with someone with the herpes simplex virus.

Primary infection appears 2 to 26 days after contact with an infected person when they have cold sores.

It has been estimated that about 90% of the population carry the herpes simplex virus so it is difficult to prevent children from picking it up. Adults with active cold sores should avoid kissing anyone especially children and babies, and should avoid sharing utensils, glasses etc.

Once someone has had the herpes simplex virus it never completely disappears and can reoccur as cold sores.

Symptoms of Herpes Stomatitis

- A temperature which may be noticed 1 – 2 days before the blisters appear
- Blisters in and around the mouth
- Ulcers inside the mouth
- Swollen gums
- Pain in mouth
- Drooling
- Difficulty swallowing

Complications of Herpes Stomatitis

If your child is unable to swallow due to pain they are at risk of dehydration.

Signs of dehydration are:

- Dry mouth and lips
- Not passing urine or less wet nappies
- The soft spot on the head may be sunken (in babies)
- Eyes appear sunken
- More sleepy than usual

If your child is dehydrated they may be put on IV fluids. This will be given through a cannula in their arm, hand or foot and will go straight into the vein. This will be until they show improvement. Whilst on IV fluids it is important to still offer food and drink.

Diagnosis

In the majority of cases, diagnosis is made based on the history of temperatures and visible ulcers in the mouth or around the eyes.

Investigations

- To confirm HSV a swab can be taken of infected areas and this will confirm if the virus is present.
- Blood samples can also be taken.
- A lumbar puncture may also be needed in extreme circumstances and this means a needle will be inserted into the spine to collect some spinal fluid. This will not hurt your child and please ask the doctor or nurse any questions you may have.

Our usual form of treatment

Herpes stomatitis can be treated with Acyclovir: also called Zovirax, this is an antiviral medication (if this is needed this will be prescribed by your doctor).

Your child may also be given a spray called Difflam which is sprayed into the mouth and has a numbing effect. This spray can be used frequently especially before eating and drinking. It is important to allow the spray 10 -15 minutes to work before giving food or drink.

Your child may be reluctant to drink due to the pain and discomfort so they need to be encouraged to have small amounts more often. Cool drinks such as milk or milkshakes may be soothing to the mouth but avoid fizzy drinks as these will make the sores hurt. It may also be easier for your child to drink through a straw.

If your child is unable to drink they may receive fluid through a drip until they are able to drink again.

Your child will also be given regular Paracetamol, to help with the pain.

Benefits of treatment

The infection should completely clear up within 10 days, this is sometimes speeded up when acyclovir is given.

Please remember, if you are staying in hospital and have any questions the nurses and doctors are there to support you and will answer any question you have.

If you have any further questions, please contact your child's consultant via their secretary via the hospital switchboard.

The secretaries are available Monday to Friday, 9.00 am to 5.00 pm

If you need to contact the department outside of these hours, please phone either:

Ward 3F 0151 430 1616

Ward 4F 0151 430 1791

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