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What is a normal temperature?

Normal body temperature varies slightly from person to person and within each individual. It is affected by factors such as sleep, food, exercise and, for women, the menstrual cycle but the average is **37°C (98.6°F)** when taken orally.

Temperatures taken in the armpit (axillary) are usually about 0.6°C (1°F) lower and those taken rectally are about 0.6°C higher.

An **oral temperature above 38°C (99.4°F)** is classified as a fever (pyrexia).

What causes a fever?

Fever is the body's natural response to infection of any kind. Viral infection is the commonest cause of fever in children. Mild fever can also occur after vaccination.

How do I know if my child has a fever?

You may suspect your child has a fever if she looks flushed and her forehead feels hot when you touch it with the back of your hand. However, sometimes children with a fever can look pale. Checking your child's temperature with a thermometer is the only reliable way of knowing if your child has a fever.

Fever alone is not an indicator of illness; other symptoms are important too. Always err on the side of caution if you feel your child seems unwell, even if their temperature is normal.

How do I take my child's temperature?

- The most accurate way to take your child's temperature is orally or rectally with a mercury or digital thermometer.
- Digital ear thermometers are also quite accurate, quick and easy to use.

- If you're taking your child's temperature rectally, coat the tip of the thermometer with petroleum jelly (Vaseline) and insert it half an inch into the rectum. Hold the thermometer still for two minutes. Never let go of the thermometer.
- If you're taking your child's temperature orally, place the end of the thermometer under the tongue and leave it there for two minutes. Don't let your child bite on the thermometer.
- After you've finished, wash the thermometer in cool, soapy water.

What are the different types of thermometer?

Glass thermometers containing mercury

This should read lower than 98.6°F before taking a temperature. To read the thermometer, hold it against a plain background and turn it gently until you can see the silver bar of mercury. (This can be quite tricky to see if you are using it for the first time so you may have to practice a bit.)

A firm downward shake may be needed before use to return the mercury to the bulb before taking a new reading.

Mercury thermometers are best for children over the age of 10 as they are less likely to bite down on them than younger children are.

Make sure your child hasn't had any hot or cold drinks before checking oral temperature.

Mercury thermometers for rectal use are also available.

Plastic temperature strips

These are placed on the child's forehead and change colour depending on the temperature. They are not very accurate but are easy to use and give a rough indication of how high the temperature is.

Digital thermometers

These are convenient and easy to use. Different types are available for oral, rectal or for use in the ear canal.

How do I bring down my child's temperature?

- Remove your child's clothes down to nappy/underwear.
- Make sure the room isn't too warm.
- If the child is in bed, cover your child with a light cotton sheet only.

- Give plenty of cold drinks for their cooling effect and to help prevent dehydration. Jellies, ice lollies and ice cubes are a good way of getting fluids into your child.
- Sponge with lukewarm water. Do not use cold water. For babies and young children, you may find it easier to put your child in a shallow bath. After sponging, take your child's temperature again.
- Give your child a temperature-lowering (anti-pyretic) drug such as paracetamol or ibuprofen.

Dosage guidelines for paracetamol are available [here](#).

Always check the total maximum daily dose of paracetamol specified in the manufacturers' patient information leaflets. **Never exceed the recommended dose.** Contact your doctor if your child's temperature is not settling.

Ibuprofen (available over the counter in pharmacies)

This is a suitable alternative to paracetamol, though often considered a second line treatment. It has similar anti-pyretic and pain-relieving properties to paracetamol but also has **anti-inflammatory properties**.

Ibuprofen is not recommended for babies under three months or for children with:

- active peptic (stomach) ulceration
- allergy to aspirin or other anti-inflammatory drugs
- liver disease
- kidney impairment
- bleeding disorders.

Ibuprofen must be used with caution in children with asthma, allergic disease, and dehydrated children.

Read the instructions carefully and never exceed the recommended dose.

When to call the doctor

Babies and small children:

Call your doctor at once if your baby has a fever and is under three-months, even if the baby doesn't seem sick. Babies this young can get very sick very quickly.

Older children:

Contact your doctor if:

- Your child's temperature is **above 39°C** even if he seems fine.
- Your child's temperature is not settling.

- Your child appears ill. Watch out for any neck stiffness, sensitivity to bright light, or purple or red spots on the skin especially if they do not disappear when pressure is applied; these can be early symptoms of meningitis.
- Your child is confused, delirious or drowsy.
- Your child has any **breathing difficulty**.

Why is it important to lower temperature in children?

Lowering a high temperature will simply make a child more comfortable. And, in children under the age of five, it will decrease the risk of a **febrile convulsion**.

What is a febrile convulsion?

Febrile convulsions are seizures or fits that happen to some young children when there is a rapid increase in body temperature. About 3-4% of children will have at least one febrile seizure. The peak age is 18-22 months but febrile convulsions can occur from six months to six years of age.

Febrile convulsions happen because the part of the brain that controls temperature is not fully developed in young children. Children usually grow out of febrile convulsions by the age of five.