

Fever Myths Parents Often Believe

The right (and wrong) ways to treat a rising temperature

Very few symptoms worry parents more than a child's high fever. Why? It may be because they've subscribed to one of the many myths about fevers that have been circulating for years. There's a lot of folk mythology about fever that's passed on from one generation to the next. Here are five common fictions about childhood fevers and the right way to handle them.

MYTH NO. 1: All fevers need to be treated.

This myth is widespread—and so is the flip side: that no fever needs to be treated. Fevers should be treated based on the comfort of the child rather than the number on the thermometer. Fevers are beneficial. They help the immune system fight infection by making the body less hospitable to germs. They also help antibiotics work better. These benefits can occur with fevers of 100° to 101° F as well as with higher ones. You will probably treat the majority of fevers over 102° F because generally they cause some discomfort.

If your child has a serious illness, you'll more than likely see a difference in her demeanor or behavior, even if she's mellow by nature. If she's playing comfortably despite her fever, you probably don't need to treat her. But if she's irritable, lethargic, or obviously uncomfortable, try to bring down the fever. Parents should trust their instincts about when their child's behavior is really off. Some doctors recommend treating any fever aggressively if a child has had a febrile seizure in the past. If yours has, you should discuss the issue with your pediatrician.

MYTH NO. 2: Febrile seizures cause epilepsy in children.

Febrile seizures—during which a child loses consciousness and control of his motor functions, resulting in a rhythmic shaking of his arms and legs—occur in 2% to 5% of all children between the ages of 6 months and 5 years. Most doctors now believe they have more to do with the rate at which the body's temperature rises than the actual height of the fever. Seizures that come with fever often happen before a parent knows that a child has a fever.

While these convulsions are truly scary for parents to witness and should always be reported to doctors, they are rarely dangerous and do not cause brain damage or increase a child's risk of developing a seizure disorder (such as epilepsy) later in life. Babies who have these seizures before age 1 have a 50% chance of having another; for children over 1, the likelihood drops to 30%. Furthermore, 90% of children who go a full year without a seizure have outgrown the tendency to have them.

MYTH NO. 3: A fever of 105° F. can cause brain damage.

Fevers of 104° or 105° F are actually common in kids of any age and won't cause brain damage. Children tend to run higher fevers than adults do, partly because their immune systems are less mature. So an infection can become more widespread before the body jumps on it. While it's true that very high fevers can cause brain damage, this occurs only when the mercury rises to 107° F or higher. This is extremely rare in children and is usually seen in specific disorders, such as malignant hyperthermia, a brain disorder, or with heat exhaustion or heat stroke. Parents are afraid of a high fever because they fear that it

will keep rising. But the body controls temperature very well. When a child has a fever, the body resets its set point from 98.6° F to, say, 104° F. Then the temperature will hover around 104° F, but will stabilize while the body fights the infection.

MYTH NO. 4: To lower your child's temperature, give her an ice or alcohol bath.

Wrong. First of all, bathing will only lower the temperature as long as the child is in the bath. Shortly after getting out, the temperature may be right back where it started. If she seems happier or more comfortable in the bath, go ahead and do it. However, it should be a lukewarm bath, one that feels like a person's natural body temperature. Or you can dip a washcloth in lukewarm water and gently rub your child's skin to dilate the blood vessels on the surface and reduce body heat. Anything cooler can lower the child's body tempera-

ture too quickly. And alcohol baths are an absolute no-no. They can cause skin problems, severe dehydration, and loss of the skin's cooling mechanism. Giving your child acetaminophen (such as Tylenol) or ibuprofen (such as Motrin) also helps to reduce fever. Many doctors prefer that parents give children acetaminophen because it has a longer safety record.

MYTH NO. 5: The higher the fever, the sicker the child.

By itself, fever is not a reliable indicator of serious illness. Gauge how your child is acting. If her behavior suggests she's feeling okay, you probably don't need to worry. On the other hand, when babies under 3 months have a fever higher than 100.4° F (rectally), call the doctor right away. In that age group, it's very hard to distinguish between children who have something mild and those who have something serious. This is the reason doctors will normally run a battery of tests on a newborn who has a fever to determine whether he has a serious bacterial illness.

