

Empiric sore throat management for preventing rheumatic fever during the COVID emergency.

Current suspect Ministry of Health COVID -19 case definition (3 April 2020) includes any acute respiratory symptoms, including sore throat.

Sore throat management programmes have been significantly affected by the COVID emergency impacting assessment and treatment of sore throat, particularly in children.

It is important not to miss any Group A streptococcal (GAS) pharyngitis in high rheumatic fever (RF) risk populations such as Māori and Pacific peoples living in lower socioeconomic conditions.

Recommendations

Do not examine sore throat or perform swab for GAS unless correct PPE is used and laboratory capacity confirms bacterial throat swabbing to continue.

Empiric treatment recommend for those at high risk for rheumatic fever:

- Māori or Pacific AND
- Aged 3–35 years, with emphasis on children and adolescents (aged 4-19 years old)

Empiric treatment as per National Sore Throat management guidelines

Best Guess Formula children aged 1 to 8 years: Weight (kg) = (2 x age) + 10

1. Amoxicillin (maximum daily dose 1000mg; daily dose for GAS 50mg/kg)

Oral suspension 250mg/5 mls or 500mg capsule

- Weight 30 kg: 750mg once daily for 10 days
- Weight ≥30kg: 1000mg once daily for 10 days

2. Penicillin V 250mg/5 ml suspension or 250 mg or 500mg capsule

- Weight < 20 kg: 250 mg 2 or 3 times daily for 10 days
- Weight ≥20 kg: 500 mg 2 or 3 times daily for 10 days

If allergy to penicillin:

3. Erythromycin ethyl succinate oral suspension 400mg/5 ml or 400mg tablet.

- 40 mg /kg/day in 2 divided doses (maximum daily dose 1600mg) for 10 days

Age	Estimated weight	Per dose 400mg/5ml susp	Per dose 400mg tab
4y	18kg	4.5ml	
6y	22kg	5.5ml	
8y	26kg	6.5ml	
	30kg	7.5ml	
	35kg	8.75ml	
Adult dose	≥40kg	10ml	2 tab

4. Roxithromycin 300mg tablet

- Adults 300 mg tab once daily for 10 days.