



Using FeverPAIN score in your practice – TARGET antibiotics summary 2016

FeverPAIN IS BEST PREDICTOR OF STREPTOCOCCUS A/C/G FROM 2 UK COHORTS:

- * **Fever last 24h**
- **Pus on tonsils**
- * **Attend rapidly (3 or less days)**
- * **severely Inflamed tonsils**
- **No cough or coryza (i.e. pharyngeal illness)**

* = univariate and multivariate in both cohorts

Little P, Moore M, Hobbs FD, et al. Primary care Streptococcal Management (PRISM) study. BMJ Open. 2013;3(10):e003943

You can use the [FeverPAIN](#) scoring system for sore throat from this link.

[PHE antibiotic guidance](#) suggests you use the FeverPAIN score to guide antibiotic use in acute sore throat:

Score 0-1: 13-18% streptococci, use NO antibiotic strategy;

Score 2-3: 34-40% streptococci, use 3 day back-up antibiotic;

4 or more: 62-65% streptococci, use immediate antibiotic if severe, or 48hr short back-up prescription.

In a [UK study](#) the FeverPAIN score reduced antibiotic use by 29% (60/161, 37%) compared to a delayed antibiotic strategy (75/164, 46%), and the score was similar to using a Rapid Antigen Detection test for Group A streptococcus (58/164, 35%). Belief in antibiotics, and reconsultation were similar in the 3 groups.

The score was developed in a large cohort of UK General practice patients aged 5 years and over: As you can see 17% of patients with acute sore throat had a FeverPAIN score of 4 or over, and of these 62% had a Group A,C,or G streptococcus. In contrast 38% had a score of ≤ 1 and only 11-14% had streptococcus, which is similar to UK carriage rates.

FeverPAIN SCORE
(FEVER, PUS, ATTEND RAPIDLY, INFLAMED, NO COUGH/CORYZA)

| FeverPAIN score in cohort of 570 patients in UK general practice | | | | | | |
|--|----------|-----------|-----------|-----------|-----------|------------|
| | 0 | 1 | 2 | 3 | 4+ | TOTAL |
| Number patients with Streptococcus (% PPV) | 7 (11%) | 21 (14%) | 45 (30%) | 40 (39%) | 62 (62%) | 175 (31%) |
| Total number patients with each score (% of total) | 83 (11%) | 155 (27%) | 149 (28%) | 103 (18%) | 100 (17%) | 570 (100%) |

Little P, Moore M, Hobbs FD, et al. Primary care Streptococcal Management (PRISM) study. BMJ Open. 2013;3(10):e003943