

## Referral Support Service

ENT

### ENT24

### Recurrent Sore Throat

#### Definition

- Inflammation of the oropharynx. This can be chronic, lasting for more than a month. It can be relapsing recurrent acute pharyngitis or tonsillitis.
- Maybe due to a recurrent pharyngitis or tonsillitis, for details of tonsillitis [see the tonsillitis guideline](#).
- It can be due to persistent infections such as candida, rhinosinusitis, or recurrent tonsillitis or dental infections.
- It can be associated with chronic irritants such as smoking, alcohol, environmental irritants and reflux associated with obesity
- It can be associated with mouth breathing from polyps or deviated nasal septum or allergic rhinitis
- It can be confused with globus and caused by laryngopharyngeal reflux- see Globus document.
- It can be associated with a tumour.

#### Exclude Red Flag Symptoms

- Unilateral swelling at the back of the throat.
- Dysphagia - Persistent sore throat particularly with unilateral features and other risk factors such as age, smoking, alcohol.
- Sore throat lasting more than 6 weeks with no cause found should be referred urgently to ENT.
- Low grade sore throat with unilateral otalgia

#### Management

- Encourage smoking cessation
- Encourage weight loss (if appropriate)
- A sore throat is most often a self-limiting disease and most often viral in origin. Usually simple OTC the counter remedies are all that is required for pain relief.
- Centor score is helping in determining when to prescribe antibiotics.

#### **Centor criteria**

- The Centor criteria was developed to predict bacterial infection (GABHS) in people with acute sore throat. The four Centor criteria are:
  - Presence of tonsillar exudate.
  - Presence of tender anterior cervical lymphadenopathy or lymphadenitis.

- History of fever.
- Absence of cough.
- The presence of three or four of these clinical signs (Centor score 3 or 4) suggests that the person may have GABHS (40–60% chance) and may benefit from antibiotics treatment.
- The absence of three or four of these signs suggests that the person is unlikely to have an infection (80% chance), and antibiotics treatment is unlikely to be necessary.
- In the UK throat swabs are not usual practice as for a simple sore throat the specificity of a swab is 70% and the sensitivity is 30%.
- Consider other non-infective causes of the persistent sore throat.
- Consider a prolonged antibiotic treatment for 10 days. Please refer to [North Yorkshire Antibiotic Guidance](#) – acute sore throat.
- First line: **Phenoxymethylpenicillin 500mg QDS for 10 days**
- Alternative (penicillin allergy): **Clarithromycin 250 – 500mg BD for 5 days**
- If persistent consider swab to rule out unusual bacteria or fungal infection.
- Discuss smoking and alcohol and reflux (consider treatment with sodium alginate – e.g. **Peptac®**). This can be purchased OTC).

## Referral Information

If considering referral for a tonsillectomy please note this procedure is not routinely commissioned. Please see the [Tonsillectomy Commissioning Statement](#) for full referral criteria.

## Indications for referral

- **2WR:** Sinister red flag features with no signs of infection – to rule out malignancy – 2WR
- **Acute:** Rare but if associated with airway compromise
- **Recurrent/Chronic:** [See tonsillitis document for recurrent tonsillitis](#). Persistent and not responding to above treatment and conservative measures.

## Information to include in referral letter

- Timing, effect on quality of life, any nasal features, previous and current treatment.
- Relevant past/ medical surgical history.
- Current regular medication.
- BMI/ Smoking status/ Alcohol status/ Employment.
- **MUST** include a completed tonsillectomy referral form [click here](#)

## Patient information leaflets/ PDAs

- [Rightcare Recurrent Sore Throat Decision Aid](#)
- [Patient Information Recurrent Sore Throat Decision Aid](#)

## References

- <https://cks.nice.org.uk/sore-throat-acute#!topicsummary>
- <https://www.nice.org.uk/guidance/CG69>

- [North Yorkshire Antibiotic Guidance \(May 2017\)](#)
- <http://bestpractice.bmj.com/best-practice/monograph/598/diagnosis/criteria.html>
- <https://cks.nice.org.uk/sore-throat-acute#!scenario>.
- <https://www.oxford.dec.nihr.ac.uk/reports-and-resources/horizon-scanning-reports/point-of-care-tests-for-group-a-streptococcus>.