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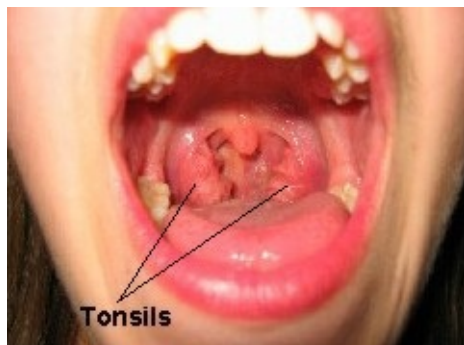
Tonsillitis

Tonsillitis is an inflammation of the tonsils. It is usually caused by a viral infection. Less often the cause is a bacterial infection.

Tonsillitis normally goes after a few days. Treatment can ease the symptoms until the infection goes. See a doctor if the symptoms are severe or don't get better quickly.

What are tonsils?

Tonsils are made of soft gland tissue and they are part of the body's defence against infections (the immune system). You have two tonsils, one on either side at the back of the mouth. The picture below shows large tonsils that are not infected (no redness or pus).



What are the symptoms of tonsillitis?

A **sore throat** is the most common of all tonsillitis symptoms. You may also have a cough, high temperature (fever), headache, feel sick (nausea), feel tired, find swallowing painful, and have **swollen neck glands**. The tonsils may swell and become red. Pus may appear as white spots on the tonsils. Symptoms typically get worse over 2-3 days and then gradually go, usually within a week. The picture below shows inflamed tonsils.



Glandular fever (infectious mononucleosis) is caused by a virus (the Epstein-Barr virus). It tends to cause a severe bout of tonsillitis as well as other symptoms. See separate leaflet called [Glandular Fever \(Infectious Mononucleosis\)](#) for more details.

Is tonsillitis infectious?

Infectious means you can pass the infection to someone else. The infection may spread by close physical contact with other people, or by droplets in the air, caused by sneezing or coughing.

As with [coughs](#), [colds](#), [flu](#) and other similar infections, there is a chance that you can pass on the virus or bacterium that has caused tonsillitis.

When should you contact a doctor?

See a doctor if symptoms of a sore throat cause severe symptoms, or if they do not ease within 3-4 days. In particular, you should seek urgent medical attention if you develop:

- Difficulty in breathing.
- Difficulty swallowing saliva.
- Difficulty opening your mouth.
- Severe pain.
- A persistent high temperature.
- A severe illness, especially when symptoms are mainly on one side of the throat.

What are the treatments?

Mild tonsillitis often doesn't need any treatment. However, it is important to drink plenty of water. Paracetamol or ibuprofen will help to ease pain, headache and high temperature. Gargles, lozenges and sprays may help to soothe a sore throat but they do not shorten the illness.

Most throat and tonsil infections are caused by viruses but some are caused by bacteria. Antibiotics kill bacteria but do not kill viruses. Even if tonsillitis is caused by a bacterium, treatment with an antibiotic does not make much difference in most cases.

If you have repeated bouts of tonsillitis you may consider having your tonsils removed (tonsillectomy).

Find out more about the [treatments for tonsillitis](#).

What is the outlook?

In nearly all cases, a tonsillitis or sore throat clears away without leaving any problems. However, occasionally tonsillitis may progress to cause a complication. Also, a sore throat or tonsillitis is sometimes due to an unusual, but more serious, illness.

Sometimes the infection can spread from the tonsils to other nearby tissues. For example, to cause an [ear infection](#), [sinus infection](#) or [chest infection](#).

What is quinsy?

Quinsy is also known as peritonsillar abscess. Quinsy is an uncommon condition where a collection of pus (abscess) develops next to a tonsil. This is caused by a bacterial infection.

- It usually develops just on one side. It may follow a tonsillitis or develop without tonsillitis.
- The tonsil on the affected side may be swollen or look normal, but is pushed towards the middle by the abscess next to the tonsil. Quinsy is very painful and can make you feel very unwell.
- It is treated with antibiotics, but also the pus often needs to be drained with a small operation.

What is the treatment for tonsillitis?

Having no treatment at all is one option. Many tonsil infections are mild and soon get better on their own. Treatment options include.

- **Have plenty to drink.** It is tempting not to drink very much if it is painful to swallow. You may become mildly lacking in fluid in the body (mildly dehydrated) if you don't drink much, particularly if you also have a high temperature (fever). Some lack of fluid in the body can make headaches and tiredness much worse.
- **Paracetamol or ibuprofen** eases pain, headache and fever. To keep symptoms to a minimum it is best to take a dose at regular intervals as recommended on the packet of medication rather than now and then. For example, take **paracetamol** four times a day until symptoms ease. Although either paracetamol or **ibuprofen** will usually help, there is some evidence to suggest that ibuprofen may be more effective than paracetamol at easing symptoms in adults. Paracetamol is usually the preferred first-line option for children, but ibuprofen can be used as an alternative. **Note:** some people with certain conditions may not be able to take ibuprofen. So, always read the packet label.
- **Other gargles, lozenges and sprays** that you can buy at pharmacies may help to soothe a sore throat. However, they do not shorten the illness.

Do I need an antibiotic for tonsillitis?

Usually not. Most throat and tonsil infections are caused by germs called viruses, although some are caused by germs called bacteria. Without tests, it is usually not possible to tell if it is a viral or bacterial infection. Antibiotics kill bacteria, but do not kill viruses.

Even if a bacterium is the cause of a tonsil or throat infection, an antibiotic does not make much difference in most cases. Your body defences (immune system) usually clear these infections within a few days whether caused by a virus or a bacterium. Also, antibiotics can sometimes cause side-effects such as diarrhoea, rash and stomach upsets.

So, most doctors do not prescribe antibiotics for most cases of tonsillitis or sore throat.

An antibiotic may be advised in certain situations. For example:

- If the infection is severe.
- If it is not easing after a few days.
- If your immune system is not working properly (for example, if you have had your **spleen removed**, if you are taking **chemotherapy**, etc).

What about having my tonsils taken out?

If you have repeated (recurring) tonsillitis you may wonder about having your tonsils removed. Guidelines suggest it may be an option to have your tonsils removed (tonsillectomy) if you:

- Have had seven or more episodes of tonsillitis in the preceding year; **or**
- Five or more such episodes in each of the preceding two years; **or**
- Three or more such episodes in each of the preceding three years.
- **And ...**
- The bouts of tonsillitis affect normal functioning. For example, they are severe enough to make you need time off from work or from school.

The adenoids may also be removed at the same time. The adenoids are also part of the body's defence against infections (the immune system). Adenoids hang from the upper part of the back of the nasal cavity. **See separate leaflet called Tonsils and Adenoids for more details.**

Although full-blown episodes of tonsillitis are prevented after tonsillectomy, other throat infections are not prevented. However, the overall number and severity of throat infections may be reduced. Also, the risk of developing quinsy is reduced. Many people say they generally feel better in themselves after having their tonsils removed if they previously had frequent episodes of tonsillitis.

Tonsillectomy is usually a straightforward minor operation. But, as with all operations, there is a risk. For example, there is a small risk of life-threatening severe bleeding from the throat during or just after the operation.

Further reading & references

- [Tonsillectomy](#); Royal College of Surgeons, 2016
- [Burton MJ, Glasziou PP, Chong LY, et al; Tonsillectomy or adenotonsillectomy versus non-surgical treatment for chronic/recurrent acute tonsillitis](#). Cochrane Database Syst Rev. 2014 Nov 19;(11):CD001802. doi: 10.1002/14651858.CD001802.pub3.
- [Spinks A, Glasziou PP, Del Mar CB; Antibiotics for sore throat](#). Cochrane Database Syst Rev. 2013 Nov 5;11:CD000023.
- [Respiratory tract infections \(self-limiting\): prescribing antibiotics](#); NICE Clinical Guideline (July 2008)
- [Management of sore throat and indications for tonsillectomy](#); Scottish Intercollegiate Guidelines Network - SIGN (April 2010)

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