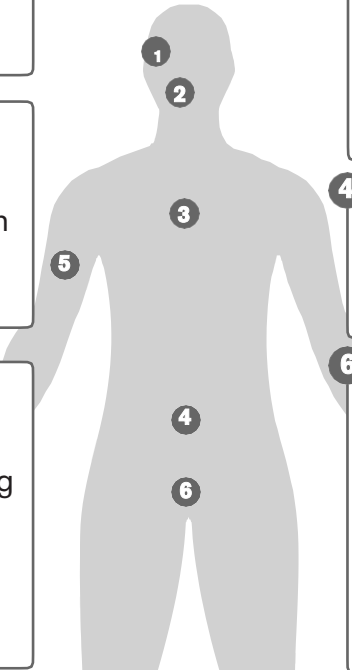


How can I manage my common infection?

A leaflet for adults aged 16 years and over

1. What are the symptoms of a common infection?



1 Eyes¹

- Sticky eyes

2 Ears, nose and throat²⁻⁴

- Pain or soreness
- Runny nose
- Swollen tonsils

3 Chest^{5,6}

- Cough
- Shortness of breath
- Green or yellow mucus

4 Gut⁷

- Vomiting
- Diarrhoea

5 Skin^{8,9}

- Infected blisters
- Redness or swelling around a wound
- Athlete's foot (an itchy rash between the toes)

6 Genital and urinary¹⁰

- Pain on passing urine
- Passing urine more often at night
- Cloudy urine
- Discharge
- Pain in lower tummy

2. What if I think I have coronavirus (Covid-19)?¹¹

If you think you may have COVID-19 then please visit <http://www.gov.uk/coronavirus> or <http://www.nhs.uk> for the latest guidance and information.

3. How can I treat a common infection?



Get plenty of rest until you feel better.¹²



Take pain relief if you need to (make sure you follow the instructions).¹²



Drink plenty of fluids (6 to 8 drinks, or 2 litres) so that you pass pale-coloured urine regularly.^{12, 13}



For **coughs**, try honey and cough medicines.¹²

For **sore throats**, try medicated lozenges and pain relief.¹²



Soothe **eye infections** with a clean warm or cold damp flannel.¹²



For an **outer ear infection**, apply local heat (such as a warm flannel).¹²

4. How long could my infection last?

Cough



21 days¹⁴

Sore throat or earache



7 to 8 days¹⁴

Common cold



14 days¹⁴

Norovirus
(winter vomiting)



2 to 3 days^{15, 16}

Sinus infection



14 to 21 days¹⁷

Contact your GP if your symptoms are getting worse or if you are not better by the times above.

5. Will my infection need antibiotics to get better?¹⁸

- Your **body can normally fight off** common infections on its own.
- You do not usually need antibiotics, unless symptoms of a **bacterial** infection (such as a urine infection) are severe – a healthcare professional can advise you on this.
- Taking antibiotics when you do not need to puts you and your family at risk.
- Follow your **healthcare professional's advice on antibiotics**.



Find out more about antibiotics at www.antibioticguardian.com

6. How can I stop my infection from spreading?

If you need to cough or sneeze:



catch it
with a tissue (or
your inner elbow)



bin it



kill it
Clean your
hands

Clean hands for at least 20 seconds with soap and water or hand sanitiser:

- ✓ before preparing and eating food
- ✓ after touching pets or animals
- ✓ after using the toilet
- ✓ when leaving and arriving home



Avoid touching your eyes, nose or mouth with unclean hands.

If possible, **keep your distance from others** (2 meters or 6 feet), especially vulnerable people in your household.



Do not share items that come into contact with your mouth, such as eating utensils and toothbrushes.



Keep yourself and your family **up to date with vaccinations**.
Always get winter vaccines (such as flu) if you are eligible.

Visit or call a **pharmacy for further advice** on common infections

7. What symptoms of serious illness should I look out for?



Severe headache and vomiting¹⁹



Ongoing **fever or chills** (temperature above 38°C or less than 36°C^{19,20})



Problems **swallowing**¹⁹
Turning blue around the mouth¹⁹



Coughing **blood**



Breathing faster or slower than usual^{19,20}



Kidney pain in your back just under your ribs²¹



Chest pain or tightness
New **very fast or slow pulse**²⁰



Visible **blood** in urine²¹
Severe pain on passing urine, or passing more urine at night²¹
Cloudy urine not improving in 1 to 2 days with fluids²¹

If you have the symptoms above, contact your GP urgently or use the following services for your region.

NHS England



When it's less urgent than 999

www.111.nhs.uk

NHS Direct Wales

NHS Direct Wales
0845 46 47
Galw **IECHYD** Cymru

www.111.wales.nhs.uk

NHS Scotland



www.nhs24.scot

Northern Ireland

HSC Public Health Agency

Project supported by the PHA

Contact your GP practice

These services can provide a confidential interpreter if you need one.

8. What if I suspect signs of sepsis?²²

Sepsis is a life-threatening reaction to an infection. Possible signs are:

- **s**lurred speech, confusion or drowsiness
- **e**xtrême shivering
- **p**assing no urine in a day
- **s**evere breathlessness
- **i**t feels like you're going to die, and
- **s**kin blotchy or discoloured.

Call 999 immediately if you or others have signs of sepsis

References and rationale

The information contained in this leaflet resource relates to the following National Institute for Health and Care Excellence (NICE) guidelines:

- [NG15 Antimicrobial stewardship](#): systems and processes for effective antimicrobial medicine use: 1.1.31, 1.1.33, 1.1.34
- [NG63 Antimicrobial stewardship](#): changing risk-related behaviours in the general population: 1.3.2, 1.5.5 and 1.5.6

Guidance from the [Summary of antimicrobial prescribing guidance – managing common infections](#) was used throughout for recommending self-care options for patients.

Section one: What are the symptoms of a common infection?

Rationale: Our research with patients found that many were not clear what constituted a common, self-limiting infection. Patients preferred visual methods of displaying this information, therefore a labelled figure was included. For simplicity, symptoms were split into effected areas of the body to help patients navigate the information.

References:

These symptoms of common infection align with descriptions used by [NHS Health A-Z](#) and use similar terminology.

1. NHS Conjunctivitis. Available at: <https://www.nhs.uk/conditions/conjunctivitis/>
2. NHS Common cold. Available at: <https://www.nhs.uk/conditions/common-cold/>
3. NHS Sore Throat. Available at: <https://www.nhs.uk/conditions/sore-throat/>
4. NHS ear Infections. Available at:

<https://www.nhs.uk/conditions/ear-infections/>

5. NHS chest infection. Available at:

<https://www.nhs.uk/conditions/chest-infection/>

6. NHS Cough. Available at:

<https://www.nhs.uk/conditions/cough/>

7. NHS: diarrhea and vomiting. Available at:

<https://www.nhs.uk/conditions/diarrhoea-and-vomiting/>

8. NHS Athlete's foot. Available at:

<https://www.nhs.uk/conditions/athletes-foot/>

9. NHS Itchy skin. Available at:

<https://www.nhs.uk/conditions/itchy-skin/>

10 Genital and urinary: NHS Urinary tract infection. Available at:

<https://www.nhs.uk/conditions/urinary-tract-infections-utis/>

Section two: What if I think I have coronavirus (Covid-19)?

Rationale: during the 2020 on-going coronavirus (covid-19) pandemic it is essential patients follow the latest government guidance on self-isolation and testing. Symptoms of coronavirus can be similar to many common infections; however it is important to rule out coronavirus. The leaflet signposts to the government website as advice and guidance is under constant review.

References:

11. Government guidance on coronavirus (COVID-19) (Gov.uk).

Available at: www.gov.uk/coronavirus

Section three: How can I treat a common infection?

Rationale: In many cases, common infections are self-limiting

and can be treated by patients at home without need for antibiotics. In this case our research with patients has indicated that they would like clear recommendations for actions they can take to help feel better faster.

References:

12. National Institute for Health and Care Excellence. Summary of antimicrobial prescribing guidance – managing common infections. March 2020. Available at: <https://www.nice.org.uk/Media/Default/About/what-we-do/NICE-guidance/antimicrobial%20guidance/summary-antimicrobial-prescribing-guidance.pdf>

Rationale: Self-care steps 1 – 3 relate to actions that are advised across many common infections.

Acute cough: NICE recommends that some people (over 1 years) may wish to try honey.

Acute sore throat: NICE recommends that medicated lozenges may help pain in adults.

Conjunctivitis: NICE first line is to bath/clean eyelids with cotton wool dipped in sterile saline or boiled (cooled) water, to remove crusting

Otitis media externa: NICE first line is analgesia for pain relief and to apply localised heat (such as a warm flannel)

13: Scottish UTI Network. Healthy pee is 1 to 3 ... 4 to 8 Must hydrate. In: Health Protection Scotland, ed2017. Available from: <http://www.hps.scot.nhs.uk/haic/sutin.aspx>

Rationale: The Scottish UTI Network developed their own urine colour chart which is reproduced in this leaflet from the TARGET 'URINARY TRACT INFECTIONS A leaflet for older adults and carers'

Section four: How long could my infection last?

Rationale: Our research with patients has indicated that they want to know the longest time it will take for their illness to improve and when it is appropriate to consult a GP due to duration of symptoms.

References:

14. Thompson M, Vodicka TA, Blair PS, Buckley DI, Heneghan C, Hay AD. Duration of symptoms of respiratory tract infections in children: systematic review. *BMJ : British Medical Journal*. 2013;347 Available from: <http://www.bmj.com/content/bmj/347/bmj.f7027.full.pdf>

Rationale: A systematic review to determine durations of symptoms, post consultation, of earache, sore throat, cough (including acute cough, bronchiolitis, and croup), and common cold in children.

Ear Ache: Seven trials with 958 children and three observational studies with 451 children were included in the analysis. Based on pooled data results from these 10 studies, 90% of children's symptoms had resolved by 7-8 days.

Sore Throat: Six trials with 241 children and one observational study were included in the analysis. Among the four studies that reported mean duration, symptoms of sore throat lasted from two days to 6.7 days however researchers were unable to pool the data due to insufficient data at several time points and as such, were unable to calculate 90% of children's symptom resolution. As such, both Little's (8 days) and Thompson's (2 - 7 days) durations have been used for sore throat in order to account for both adults and children – thereby allowing the leaflet to be used in both adult and child consultations.

Common Cold: Based on the pooled data from five studies, by day 10 about 50% of children had improved. The researchers did not have sufficient data to determine the time at which 90% improved, but estimated this as about 15 days. Bronchiolitis: Analysis included six trials of acute cough, croup or bronchiolitis with 700 children. Based on pooled data from four studies, 50% of children improved by day 13 and using this data, researchers estimate the time for 90% to improve researchers to be 25 days

15. Ben A. Lopman, Mark H. Reacher, Ian B. Vipond, Joyshri Sarangi,

David W. G. Brown, Clinical Manifestation of Norovirus Gastroenteritis in Health Care Settings, *Clinical Infectious Diseases*, Volume 39, Issue 3, 1 August 2004, Pages 318–324

16. Kaplan JE, Feldman R, Campbell DS, Lookabaugh C, Gary GW. The frequency of a Norwalk-like pattern of illness in outbreaks of acute gastroenteritis. *Am J Public Health*. 1982 Dec;72(12):1329-32.

Rationale: symptoms of norovirus (namely vomiting) are well known to be a short lived, with some variation for individuals. Studies tend to report a mean (or median) duration of illness 12-60 hours or 1 – 3 days. Hospitalised patients tend to have a slightly longer period of symptoms with median 3 days and recovery within 5 days.

17. National Institute for Health and Care Excellence. Sinusitis (acute): antimicrobial prescribing. NICE guideline [NG79] Published date: 27 October 2017. Available at: <https://www.nice.org.uk/guidance/ng79/chapter/Symptoms-and-signs>

Rationale: NICE guidelines suggest that patients should be made that symptoms can last for 2 to 3 weeks and most people will get better within this time without treatment, regardless of cause (bacteria or virus).

Section five: will my infection need antibiotics to get better?

Rationale: This NICE guideline covers recommendations for educating the public about correct use antimicrobial medicines (including antibiotics) and the dangers associated with their overuse and misuse. It aims to change people's behaviour to reduce antimicrobial resistance and the spread of resistant microbes.

References:

18. National Institute for Health and Care Excellence. Antimicrobial stewardship: changing risk related behaviours in the general population. 2017. Available from: <https://www.nice.org.uk/guidance/ng63/resources/antimicrobialstewar>

[dship-changing-riskrelated-behaviours-in-the-generalpopulation-pdf-1837572082117](https://www.nice.org.uk/guidance/1837572082117)

Section six: How can I stop my infection from spreading?

Rationale: This section provides an opportunity to reiterate simple hygiene steps that can help prevent infections spreading to others.

Section seven: What symptoms of serious illness should I look out for?

Rationale: A section for safety netting with serious signs of illness to look out for that need immediate attention from a healthcare professional.

References:

19. National Institute of Health and Care Excellence (NICE). Sepsis: Recognition, diagnosis and early management. 2016 Jul. Available from: <https://www.nice.org.uk/guidance/ng51/resources/sepsis-recognition-diagnosis-and-early-management-1837508256709>.

Rationale: A NICE guideline, stating that people with sepsis may have non-specific, non-localised presentations, such as feeling generally unwell without a high temperature of over 38°C. This guideline presents a risk stratification tool for adults, children and young people aged 12 years and over with suspected sepsis. Where high temperature is recognised as a cause for concern, this guideline also lists a tympanic temperature of less than 36°C as a moderate to high risk criteria for sepsis

20. National Early Warning Score (NEWS) 2. Royal College of Physicians. Available at:

<https://www.rcplondon.ac.uk/projects/outputs/national-early-warning-score-news-2>

Rationale: The NEWS is based on a simple aggregate scoring

system in which a score is allocated to physiological measurements, already recorded in routine practice, when patients present to, or are being monitored in hospital. Six simple physiological parameters form the basis of the scoring system: respiration rate; oxygen saturation; systolic blood pressure; pulse rate; level of consciousness or new confusion*; temperature.

21. Scottish Intercollegiate Guidelines Network (SIGN). Management of bacterial urinary tract infection in adults. 2012 Jul. Available from: <http://www.sign.ac.uk/assets/sign88.pdf>.

Rationale: A SIGN guideline, outlining symptoms of bacterial urinary tract infections as: dysuria; frequency of urination; suprapubic tenderness; urgency; polyuria; haematuria. Expert consensus is that, in women with symptoms of vaginal itch or discharge, alternative diagnoses to UTI should be explored. This guideline also provides details of UTI symptoms suggestive of pyelonephritis, including: loin pain; flank tenderness; fever; rigors; other manifestations of systemic inflammatory response, and suggests admission to hospital if there is no response to antibiotic treatment within 24 hours.

Section eight: What if I suspect signs of sepsis?

Rationale: although many signs of sepsis are covered in section seven (signs of serious illness), patients involved in the development of this leaflet requested information directly on sepsis, including a way to remember the most common signs. Therefore the 'SEPSIS' acronym used by the sepsis trust was included, as well as a statement explain what sepsis is.

22. Sepsis trust. Available at: <https://sepsistrust.org/about/about-sepsis/>