

Clinical support tool for community pharmacists

		LYMPHADENOPATHY (LAN) IN CHILDREN	Is there a high ri infectiou
Table 1	Green – Low risk	Amber – Intermediate risk	
Size	Less than 2cm	Lymphadenitis / lymph node abscess – painful, tender unilateral LN swelling. Overlying skin may be red/hot. May be systemically unwell with fever.	Larger than 2cm a
Site	Cervical, axillary, inguinal	EBV – cervical or generalised LAN, exudative pharyngitis, fatigue, headache +- hepatosplenomegaly.	Supraclavicular or concerning
History	Recent viral infection or immunisation	Atypical mycobacterial infection – non-tender, unilateral LN enlargement, systemically well. Most common between 1-5 years of age. Progresses to include overlying skin discolouration. Consider mycobacterium tuberculosis – any risk factors?	Fever, weight loss
Examination	Eczema, Viral URTI	Cat-scratch disease – usually axillary nodes following scratch to hands in previous 2 weeks. Highest risk with kittens.	Hepatosplenomeg

Reactive LAN

- Reassure parents that this is normal - improves over 2-4 weeks but small LNs may persist for years
- No tests required
- Provide advice leaflet

LAN due to poorly controlled eczema

- Generalised LAN extremely common
- Check eczema treatment being administered as prescribed.
- If LAN persists despite eczema treatment being administered as prescribed, refer to primary care for review
- Provide advice leaflet

Actions

· Refer to primary care for review

This document was arrived at after careful consideration of the evidence available including but not exclusively NICE, SIGN, EBM data and NHS evidence, as applicable. Healthcare professionals are expected to take it fully into account when exercising their clinical judgement. The guidance does not, however, override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient in consultation with the patient and / or carer.



Also think about ... TB

re a history of TB exposure, travel to risk area - discuss concern with local ous disease specialist.

Red – high risk

and growing

or popliteal nodes especially

ss, night sweats, unusual pain, pruritis

egaly, pallor, unexplained bruising



Differential includes malignancy (leukaemia / lymphoma) and rheumatological conditions (JIA / SLE / Kawasaki disease)

• Urgent referral to GP / OOH primary care service