CONDITION

Pharyngitis - sore throat

Pharyngitis is inflammation at the back of the throat that causes soreness and painful swallowing.

WHAT IT IS
Inflammation of the back of the throat

BODY SYSTEM
Throat and upper airway

MAIN SYMPTOMS
Sore throat, painful swallowing, fever, swollen neck glands

WHAT CAUSES IT
Usually viral infection, sometimes bacterial infection or irritation

HOW IT IS DIAGNOSED
Throat examination; strep testing when suspected

MAIN TREATMENT
Symptom relief; antibiotics for confirmed or likely strep

CAN IT BE CURED?
Yes - most cases fully resolve

IS IT AN EMERGENCY?
Sometimes - breathing difficulty or inability to swallow

LONG-TERM OUTLOOK
Most cases resolve within one week

Overview

Pharyngitis means inflammation of the pharynx, which is the area at the back of your throat. It is what people usually mean by a sore throat.

Most cases are caused by viruses, including those responsible for colds and flu-like illnesses. Some are caused by bacteria. The most important bacterial cause is group A Streptococcus, often called group A strep. This infection is commonly known as strep throat.

A sore throat may also come from allergies, smoke, dry air, acid reflux, or strain from shouting or prolonged speaking. In these cases, infection is not the cause.

Most sore throats improve without complications. However, identifying possible strep throat can matter because antibiotics like amoxicillin or doxycycline may shorten the illness, reduce

its spread, and prevent uncommon complications. Severe throat symptoms can occasionally signal swelling or a deeper infection that needs urgent care.

Symptoms

The main symptom is pain, dryness, or irritation in the throat. Swallowing may make the pain worse.

Other symptoms may include:

Symptoms can offer clues about the cause, but they cannot always identify it reliably.

A cough, runny nose, hoarse voice, red eyes, or mouth ulcers makes a viral infection more likely. Strep throat is more likely to cause a sudden sore throat, fever, painful swallowing, swollen neck glands, and inflamed tonsils without a cough. These patterns overlap, so appearance alone may not be enough.

Young children may not describe throat pain clearly. They may refuse food, cry during swallowing, drool more than usual, or seem unusually irritable.

Glandular fever, also called infectious mononucleosis or "mono," can cause a severe or long-lasting sore throat. Other signs include marked tiredness and swollen glands, especially in teenagers and young adults.

- Redness at the back of the throat
- Swollen tonsils, sometimes with white patches
- Tender or swollen glands in the neck
- Fever or chills
- Headache, tiredness, or body aches
- Reduced appetite
- A hoarse voice

Causes and risk factors

Viruses cause most cases of acute pharyngitis. These include viruses that cause common colds, influenza, COVID-19, glandular fever, and several childhood infections.

Bacterial pharyngitis is less common. Group A strep is the main bacterial cause. It is more frequent among school-aged children than very young children or adults, although anyone can become infected.

Throat infections spread through respiratory droplets and close contact. Sharing cups or utensils and touching contaminated surfaces may also help some infections spread. Risk is higher in crowded settings such as households, schools, nurseries, and military accommodation.

Non-infectious causes include:

Repeated or persistent symptoms may have more than one cause. For example, nasal congestion can lead to mouth breathing, while reflux can cause soreness that is worse after meals or on waking.

- Tobacco smoke, vaping aerosols, air pollution, or chemical fumes
- Dry indoor air or breathing through the mouth
- Hay fever and other allergies
- Mucus draining from the nose into the throat
- Acid reflux reaching the throat
- Heavy voice use
- Irritation after a medical procedure involving the airway

Diagnosis

A healthcare professional will usually ask when the symptoms began and whether you have a cough, fever, rash, swollen glands, breathing problems, or difficulty swallowing. They may examine your mouth, tonsils, throat, neck, ears, and nose.

If symptoms clearly suggest a viral infection, testing for strep may not be useful. White spots on the tonsils do not prove that bacteria are present because viral infections can cause a similar appearance.

When strep throat is possible, testing may include a rapid antigen test. A swab is rubbed over the tonsils and back of the throat to look for parts of group A strep bacteria. Results may be available quickly.

A throat culture involves sending a swab to a laboratory to see whether bacteria grow. It takes longer but may detect infections missed by some rapid tests. In children and teenagers, a negative rapid test may be followed by a culture, depending on the test and local guidance. This is less often needed in adults because serious post-strep complications are much less common.

Further tests are not normally needed for a short-lived sore throat. Blood tests or other

investigations may be considered if symptoms are severe, keep returning, last longer than expected, or suggest glandular fever or another condition.

Treatment and management

Most viral sore throats improve as the immune system clears the infection. Antibiotics do not work against viruses and will not usually make a viral sore throat improve faster.

Simple measures may reduce discomfort:

Over-the-counter pain relievers, such as paracetamol or an anti-inflammatory medicine, may help with pain and fever. Not every product is suitable for everyone. Follow the package directions and check with a pharmacist if you are pregnant, take other medicines, or have kidney, liver, stomach, bleeding, or other medical problems. Aspirin should not be given to children or teenagers unless specifically directed by a clinician.

Antibiotics may be recommended for confirmed strep throat or when bacterial infection is considered sufficiently likely. The choice of medicine depends on factors such as allergies, age, local guidance, and test results. If prescribed an antibiotic, take it as directed and complete the advised course unless the prescriber tells you to stop.

Avoid using leftover antibiotics or another person's medicine. Unnecessary antibiotics can cause side effects and contribute to antibiotic resistance, meaning bacteria become harder to treat.

Persistent pharyngitis caused by reflux, allergy, or an irritant needs management of that cause rather than antibiotics.

- Drink enough fluid to avoid dehydration
- Choose cool, warm, or soft foods according to comfort
- Gargle warm salty water if you can do so safely
- Avoid smoking, vaping, and smoky environments
- Rest your voice if speaking is painful
- Use throat lozenges if they are safe for your age

Complications

Complications are uncommon, particularly with viral infections.

A throat infection can occasionally spread into nearby tissue and form an abscess, which is a

pocket of pus. A peritonsillar abscess develops beside a tonsil and may cause severe one-sided pain, a muffled voice, drooling, difficulty opening the mouth, or swelling that pushes the uvula away from the affected side. The uvula is the small piece of tissue hanging at the back of the mouth.

Deeper infections in the neck can cause neck swelling, stiffness, worsening pain, or breathing difficulty. These need urgent assessment.

Untreated group A strep can rarely lead to rheumatic fever, an inflammatory illness that may affect the heart, joints, skin, or nervous system. It can also be followed by kidney inflammation called post-streptococcal glomerulonephritis. Antibiotics help prevent rheumatic fever but do not reliably prevent this kidney complication.

Not drinking because swallowing hurts can lead to dehydration. Warning signs include very dark urine, passing much less urine, dizziness, a dry mouth, or unusual sleepiness.

Prevention

Not every sore throat can be prevented. Viruses and bacteria spread easily, sometimes before symptoms are obvious. Sore throats caused by allergy, reflux, or unavoidable environmental exposure may also recur.

You can lower the chance of spreading an infection by washing your hands, covering coughs and sneezes, and not sharing drinks, utensils, toothbrushes, or food. Clean frequently touched surfaces when someone in the household is unwell.

Avoid close contact with other people while you have a fever or feel acutely unwell. According to US public health guidance, people with strep throat should generally stay home until they no longer have a fever and have taken an appropriate antibiotic for at least 12 to 24 hours. Local school, childcare, or workplace rules may differ.

Avoiding tobacco smoke and vaping aerosols can reduce throat irritation. If dry air repeatedly affects your throat, improving room humidity may help, but humidifiers must be cleaned regularly to prevent mould and bacterial growth.

Living with it and what to expect

Most acute sore throats improve within several days and settle within about a week. A cough or tiredness from the same viral infection may last longer than the throat pain.

With strep throat, symptoms often begin to improve after appropriate antibiotic treatment, but

recovery is not immediate. Seek follow-up if symptoms are getting worse, are not beginning to improve after treatment, or return soon afterward.

Repeated sore throats may be linked to frequent infections, enlarged tonsils, allergies, nasal blockage, reflux, smoking, or another source of irritation. Keeping a brief record of timing, fever, cough, test results, and possible triggers can help during a routine appointment.

A sore throat that lasts for several weeks is not typical of simple acute pharyngitis. It should be assessed, especially if it is mainly on one side or occurs with a persistent neck lump, ongoing hoarseness, unexplained weight loss, or difficulty swallowing. These symptoms can have several causes and do not necessarily mean something serious.

Most people return to their usual activities without lasting effects. Long-term management is generally needed only when an underlying problem, such as reflux or allergy, continues to irritate the throat.

When to get medical help

Call emergency services now if you or someone in your care:

Seek urgent same-day medical care for severe one-sided throat pain, a muffled voice, difficulty opening the mouth, significant neck swelling, or worsening symptoms after an initial improvement. These can occur with an abscess or deeper infection.

Prompt assessment is also appropriate if there are signs of dehydration, a widespread rash with fever, a weakened immune system, or severe symptoms in a young child.

Arrange routine medical follow-up if the sore throat lasts longer than expected, keeps returning, or comes with persistent hoarseness, a neck lump, or ongoing trouble swallowing. Follow-up is also sensible if prescribed treatment is not helping or causes side effects.

- Is struggling to breathe or making a harsh noise while breathing
- Cannot swallow saliva or is drooling because swallowing is impossible
- Has blue, grey, or unusually pale lips or skin
- Becomes confused, collapses, or is very difficult to wake
- Develops rapidly increasing swelling of the tongue, mouth, throat, or neck

Common questions

Is strep throat the same as pharyngitis?

No. Pharyngitis describes inflammation at the back of the throat. Strep throat is pharyngitis caused specifically by group A strep bacteria. Viruses cause many more sore throats than strep does.

Can I tell if my sore throat is viral or bacterial?

Not reliably. Cough, runny nose, hoarseness, or red eyes point more toward a virus. Sudden pain, fever, swollen neck glands, and no cough can suggest strep. A rapid test or throat culture may be needed to confirm group A strep.

Do white spots mean I need antibiotics?

Not by themselves. Both viral and bacterial infections can produce white material on the tonsils. A healthcare professional considers the full symptom pattern and may use a strep test before recommending antibiotics.

How long is a sore throat contagious?

It depends on the cause. Viral infections may spread before symptoms start and while symptoms are active. Group A strep becomes much less likely to spread after appropriate antibiotics have been taken for 12 to 24 hours and the fever has gone. Follow local public health advice.

Why does my throat hurt more at night or in the morning?

Dry air, mouth breathing, nasal drainage, snoring, and acid reflux can irritate the throat overnight. Repeated morning soreness is worth discussing at a routine appointment, especially if you also have heartburn, nasal blockage, or loud snoring.

Can my tonsils be removed for repeated sore throats?

Tonsil removal may be considered when severe, documented tonsillitis happens repeatedly or causes major problems. Surgery has risks and does not prevent every future sore throat. Assessment is based on the number and severity of episodes and their effect on daily life.

Sources

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