

INFECTIOUS MONONUCLEOSIS

Each year about 50 out of every 100,000 Americans get infectious mononucleosis, known popularly as "mono" or "the kissing disease". Anyone of any age may develop mono, but the disease is more common in persons between the ages of 15 and 30, especially among those living in close contact at schools, colleges, and military camps.

Infectious mononucleosis is caused by the Epstein-Barr virus (EBV). EBV is so common that nine out of ten people have already been infected with it by the time they reach adulthood. However, most of these people either never develop symptoms at all or develop symptoms so mild that they go unrecognized as mononucleosis.

How Mono Is Diagnosed

It takes about four to seven weeks before EBV starts causing trouble for the infected person. The person with mononucleosis almost always has a general sick feeling (malaise) and may sleep for twelve or more hours a day. Other typical signs are fever, headache, sore throat, and swollen lymph nodes ("glands") in the neck, under the arms, and in the groin. The liver is frequently mildly affected. In about half of people that get mono, the spleen (a soft organ near the stomach important for filtering the blood) becomes enlarged.

After talking with you and examining you, if your doctor suspects that you have mononucleosis, blood tests are done to confirm it. Usually there is an increased number of certain types of white blood cells (mononuclear leukocytes and atypical lymphocytes). The lab can also usually detect the presence of antibodies to EBV in the blood. Sometimes the tests are negative early in the disease but become positive later on, so the tests are sometimes repeated.

Expected Course

Most children only have mild symptoms for a week. Even in the adolescent or adult where symptoms may be more severe, mononucleosis usually runs its course in three to four weeks. However, in a small number of people, the disease may linger for six months or longer. Don't despair if you do not seem to improve right away. Your vigor will return in a matter of time.

Complications are rare. The most common complication is dehydration from not drinking enough fluids. Breathing or swallowing may be obstructed by enlarged tonsils, adenoids, and other lymph tissue in the back of the throat. On rare occasions, the enlarged spleen will rupture if the abdomen is hit or strained, causing internal bleeding, shock, and even death.

Treatment

Unfortunately, there is still no drug that can be used to treat a

viral infection like mononucleosis the way that antibiotics are used to treat bacterial infections. However, your doctor may prescribe these drugs if you develop a bacterial infection, like an ear infection or strep throat, on top of the mononucleosis. Because over 90% of youngsters with mono will develop a rash if they receive ampicillin or amoxicillin, these medications should be avoided.

Acetaminophen or ibuprofen may be used to lower fever and to relieve the pain of a sore throat or headache. Gargling, throat lozenges, or throat sprays (e.g. Chloraseptic) may also help to relieve the throat pain. Make sure to drink plenty of liquids, and start a soft diet as soon as you can tolerate it.

You may have heard that people with mononucleosis must get into bed and stay there. In fact, there is no evidence that forced bed rest speeds recovery. Instead, most doctors now suggest that people with mono reduce their activity to a level that they are comfortable with and make sure to get enough rest. However, contact sports and other strenuous activities are definitely out for at least six to eight weeks. This precaution is important to protect the enlarged spleen from injury.

Is Mono Contagious?

Surprisingly enough, infectious mononucleosis is not highly contagious. While EBV may spread to other household members, especially younger children, it is in fact seldom found in members of the same family at the same time. Mono is probably not spread by coughing or sneezing, and people who have it can certainly have visitors, eat with the family, and return to school or work when their strength is back. It is a good idea though to refrain from kissing or the sharing of drinking glasses or eating utensils until recovery is complete.

Can Mono Recur?

Once someone's been infected with EBV, whether they develop full-blown mono or not, they usually become immune to further infection. However, EBV, like the herpes virus, remains in the body for life. From time to time, it may reappear in the saliva without causing symptoms. It's possible that the virus can spread at these times. This is no cause for worry, however, since, as mentioned earlier, 90% of people are already immune.

Follow-Up

We will usually want to see someone whose spleen is enlarged weekly until it is back to normal size. Otherwise, you should call for another appointment if breathing becomes difficult, urinating is much decreased, or you can't even swallow liquids. Call immediately if there is sudden abdominal pain or left shoulder pain and skin paleness. Also let us know if the fever isn't gone in ten days, if you are not back in school by two weeks, or if any symptoms remain after four weeks.