Your child feels warm and achy. As a parent or caregiver, you become anxious and reach for the acetaminophen to dose them right away. But is this the only option? When fever is dosed with acetaminophen or another fever reducer, the inner wisdom that keeps your child's body in balance is circumvented. A fever is a symptom, not a disease and, as such, is not something to eliminate. Rather, it is a helpful and necessary part of the process of healing an acute illness, such as flu, urinary tract infection, or ear infection. A parent's calm attitude towards fever and illness can serve to reassure a sick child they will recover.

A fever (oral temperature > 99.4°F or rectal temperature > 100.4°F) is an increase in the body's temperature, which sets the natural immune response process in motion. It initiates the rapid production of bacteria-eating white blood cells and the destruction of virus-containing cells. Higher body temperatures stimulate a decrease of certain minerals (iron, zinc, copper) in the blood that are needed for bacterial replication.1 Other body processes are altered, as well: the heart beats faster, carrying blood more quickly to the organs; respiration and metabolism speed up, boosting oxygen intake and consumption; other immune mediators increase and become more protective; the body perspires, helping it cool naturally. During a fever, the body alters its metabolism to starve bacteria, which creates a lack of appetite in the child's body.1 A feverish body aches to encourage slowing down and resting, allowing the body to heal.

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Letting a fever run its course may reduce the length and severity of such illnesses as colds and flu. Fever makes the immune system more physiologically efficient. Children who run a fever during their first year are less likely to develop allergies later in childhood.2 Most immunocompetent (ability to develop an immune response) adults and children (not necessarily infants) can run a fever of up to 103°F for a few days with no danger, as long as they remain adequately hydrated. The brain has an internal regulatory mechanism preventing normal fevers from getting higher than 105 or 106 degrees. Impaired temperature regulation can allow the body to rise to 105 degrees or higher, possibly indicating the presence of a more serious underlying condition (bacterial infection, brain tumor or heatstroke, for example) which requires immediate medical attention.3 Two to 4 percent of children will have a febrile seizure, usually benign, by age five (brief loss of consciousness, eyes rolling back, stiffness, twitching, with no intracranial infection nor history of non-febrile seizures).4 Although they can be scary, most are harmless and cause no permanent effects. “Fever seizures don’t cause brain damage. Children with febrile seizures often do fine in school and perform as well on IQ tests as their siblings who don’t have seizures.”5

In treating your child, the goal is to minimize discomfort and help the fever achieve healing, not to focus on lowering the fever itself. One or more of the following therapies may be utilized. Sponge down your child with tepid (not cold) water if the fever goes above 103°F: expose and sponge one limb at a time until it feels cool to the touch. Dry and replace it under the covers before going on to the next limb. This helps the temperature drop 1 to 2°F and can be repeated as needed. Using water that is too cold may cause chilling. Discontinue treatment if this occurs and re-warm the child. Sponging the face and forehead alone can also give relief. A feverish, but not desperately ill, child can occasionally be immersed in a tepid bath to reduce a fever. Keep a hot, feverish child cool, and a chilly feverish child (one who feels cold to the touch and shivers) warm. Make sure a sick child gets plenty of fluids to prevent dehydration (water, diluted fruit juice, real fruit popsicles, etc.) and rest with minimal stimulation. A dark room, soft music, or listening to a book being read contributes to a restful environment. Only fluids or very easily digested foods should be offered to a child with an elevated temperature. The body needs to focus energy on the immune system, not digestion.

The Wisdom of Letting Fever Run Its Course

by Leigh H. White, ND

Your child feels warm and achy. As a parent or caregiver, you become anxious and reach for the acetaminophen to dose them right away. But is this the only option? When fever is dosed with acetaminophen or another fever reducer, the inner wisdom that keeps your child's body in balance is circumvented. A fever is a symptom, not a disease and, as such, is not something to eliminate. Rather, it is a helpful and necessary part of the process of healing an acute illness, such as flu, urinary tract infection, or ear infection. A parent's calm attitude towards fever and illness can serve to reassure a sick child they will recover.
Homeopathy can comfort an aching child and assist the process of fever. Your family’s naturopathic doctor or homeopathic practitioner is an invaluable resource for guiding the remedy choice. Practitioners may consider remedies such as Aconitum napellus, Belladonna, Chamomilla, Gelsemium, or Pulsatilla. Prescriptions are based upon the total symptom picture of the child (onset, mood, temperature, thirst level, what makes the child feel better or worse). A parent should feel empowered to support their child through sickness, but be mindful of calling their doctor, especially in cases of serious illness (see bullet points below).

There are times when fever, sometimes in combination with other symptoms, should initiate an immediate call to your doctor. General accepted guidelines include:

- Rectal temperature of > 100.4°F (in infants under 3 months);
- Temperature > 101°F (in infants 3 to 6 months);
- Fever of 3+ days long (in children older than 6 months);
- Temperature > 103°F (in children 3 months to 2 years);
- True lethargy (limp, unresponsive, looks/acts very sick);
- High fever accompanied by any meningitis symptoms: strange rash, bad headache, stiff or painful neck, light sensitivity;
- Constant, inconsolable crying; whimpering; high pitched cry.

The bottom line in fever response and in dis-ease, in general, is that bodies are designed to achieve equilibrium and naturally re-balance themselves when challenged. Trust in the body’s wisdom! Allowing a fever to run its course can be the best option for the child’s acute illness and future immune health.

References: