

Glandular fever

Karawaka repe

Glandular fever (also known as infectious mononucleosis) is a viral infection. It's caused by the Epstein–Barr virus (EBV), and affects mainly young people between the ages of 15 and 24 years.

You catch glandular fever through close person-to-person contact. This can include kissing, and sharing cups and toothbrushes.



Most people have been infected with EBV at some time, but many people have no symptoms. However, the virus causes glandular fever in up to half of teenagers and young adults who catch it.

It's very rare to have glandular fever more than once.

Symptoms of glandular fever

Some people don't develop any symptoms despite being infected with the virus. If you have glandular fever you'll usually have some of the following symptoms for up to two to three weeks.

- Fever and flu-like symptoms, such as a high temperature, aching muscles, and headaches.
- Sore, red and swollen throat. It may hurt to swallow, so you can get a lot of saliva in your mouth. Your GP is likely to suspect glandular fever if you've had a severe sore throat that lasts longer than usual.
- Swollen lymph glands. This happens because your immune system is fighting the virus. Commonly people notice swollen glands around the neck, under the jaw, but you can have swollen glands in other areas of your body as well.
- Fatigue. Glandular fever can make you feel very tired. This is often the last symptom to go away and can last for several months after the initial infection.
- Swollen, painful spleen. This is less common. Your spleen is an organ under your ribs on the left side of your tummy. As with your lymph glands, glandular fever can make it swell. Your liver can also become inflamed.

Most people get better within a few weeks, but some people can take months to fully recover.



Diagnosing glandular fever

Your GP will usually diagnose glandular fever without having to do any tests. If your symptoms continue, or the diagnosis isn't clear, a blood test for EBV can check for glandular fever.

Your GP may consider other causes, such as a strep throat or another viral infection.

Self-care for glandular fever

Glandular fever usually goes away by itself. As glandular fever is caused by a virus, antibiotics won't be effective.

You can help yourself by:

- avoiding strenuous activities, exercise, and ensuring you get lots of sleep
- taking pain relief, such as paracetamol or ibuprofen to ease your pain, headache, and fever
- making sure you drink plenty of fluids to keep well hydrated
- avoiding alcohol. Glandular fever can also affect your liver, and drinking alcohol can make you feel worse.

Complications of glandular fever

Most people don't have complications from glandular fever. If you do, they may include:

- Ongoing tiredness, sometimes for months. This usually improves with time. You may need to start back at school or work for a few hours at a time, and gradually ease back in, to make sure you don't get too tired.
- A red, but not itchy, rash that covers a lot of your body. This usually goes away quite quickly.
- Yellow skin (jaundice). This can happen if you get an inflamed liver, but it isn't serious and usually goes away quickly.
- A damaged spleen. This is very rare, but serious. It usually happens during contact sports if your spleen is enlarged. It's best to avoid contact sports and vigorous exercise for four to six weeks after having glandular fever.

Preventing the spread of glandular fever

EBV is spread by close contact with the saliva or snot (nasal secretions) of infected people. This can happen by touching hands, toys, eating utensils, drink bottles, or by kissing.

People can be infectious for up to seven weeks before they get symptoms, and for many months after their symptoms go away. It's important to avoid close contact with anyone who has, or has recently had, glandular fever. Try not to kiss, share cups, cutlery or towels with other people.

Good hand hygiene prevents the virus spreading. Make sure you wash your hands regularly and well.

Written by Medical Liaison Manager, Southern Community Laboratories. Adapted by HealthInfo clinical advisers. Last reviewed May 2022.