INFECTIOUS MONONUCLEOSIS—aka MONO

WHAT IS INFECTIOUS MONONUCLEOSIS?
Infectious mononucleosis (Mono) is an illness caused by several viral agents, most commonly the Epstein-Barr virus (EBV). Mono is an extremely common illness in children and young adults, with many cases being mild and resolving promptly without the patient feeling sick enough to seek medical care. On occasion, mono can cause a more prolonged illness with protracted sore throat and profound fatigue. Serious complications are rare, and the illness usually resolves completely without residual problems.

The most common symptoms of mono include sore throat, fever, fatigue, and the development of swollen glands in the neck. Other signs and symptoms which may appear include skin rash, muscle aches, congestion, and abdominal pain. Mono can cause temporary enlargement of the liver and spleen, and occasionally produce a transient liver inflammation called mono hepatitis.

HOW DO I KNOW IF I HAVE MONO?
If your symptoms resemble the ones above, it does not necessarily mean you have Mono. Many viral illnesses cause a similar picture. But if the illness persists for more than a few days with persistence of sore throat, swollen glands and fever, you should consider a visit to the Student Health Center to help evaluate your symptoms and possibly test your blood for evidence of mono. There is a rapid screening test done at the Student Health Center which is quite specific for diagnosing Mono, although in the early stages of illness the test may not yet have turned positive so a negative test may need to be repeated to establish the diagnosis. Tests for antibody to EBV and other causative viral agents are available, although these take several days to a week to be reported and are somewhat expensive, which makes them less useful as a screening tool. Often, the diagnosis of Mono can be made on clinical grounds with the blood test used for confirmation.

HOW DID I GET MONO?
Infectious Mononucleosis is spread primarily through saliva, which is how it got the name “The Kissing Disease.” While not nearly as contagious as influenza and other respiratory infections, studies indicate that the majority of college students develop antibodies to EBV by the time they graduate, indicating infection at some point. Most of them were never aware of having mono. It can be hard to tell who passed the infection to you because only about one third of the people who become infected with EBV develop classic mono. An infected person who never gets ill can still unknowingly give the virus to others. Also, people who have had mono may have the virus in their saliva long after the illness is over. A majority of cases probably are contracted through intimate contact between a susceptible person (someone who can catch mono because they do not have antibodies to EBV), and a healthy person who has EBV in their saliva. In most cases, people who have been infected with EBV are immune from ever getting the virus again.

HOW IS MONO TREATED?
Antibiotics are not useful in treating viral diseases like mono, although they are sometimes used to treat complicated infections. While there is no pill or shot to cure mono, your body should be able to successfully fight the infection if you take proper care of yourself while sick.

Treatment usually includes adequate rest, increasing fluid intake, a well balanced diet, saline gargles, and a pain reliever such as acetaminophen for your fever, sore throat and other aches and pains. Occasionally stronger medicine for pain relief is indicated. Severe swelling of the throat
and some other mono related problems are occasionally treated with cortisone. As Mono can affect the liver, it is wise not to drink alcohol while you are ill and during the period of recovery.

**What are some of the complications of MONO?**

- **Strep**
  In 8-10% of mono cases the infection is complicated by Group A streptococcal infections in the throat (strep throat) and tonsils. Antibiotics can treat strep throat, but are not effective against Mono.

- **Inflammation of the Liver and Jaundice**
  One complication of Mono is *Mono hepatitis*, which is an inflammation of the liver possibly resulting in jaundice. Jaundice, which occurs when bile enters the blood, can cause the skin and urine to become abnormally yellow. While the virus may cause minor liver abnormalities, these probably won’t require special treatment and liver function should return to normal as you recover. People with Mono hepatitis do tend to be sicker, especially if they experience vomiting and dehydration.

- **Rupture of the Spleen**
  Rupture of the spleen is a rare, but serious complication of Mono. This occurs in only one or two people with mono per 1,000, usually in the first three weeks of illness. Direct blows to the spleen or too much physical exertion account for about ½ of ruptured spleens among people with mono. A sign that a person’s spleen may be rupturing is pain starting in the upper left abdomen, sometimes radiating to the top of the left shoulder. If this occurs, emergency medical care should be sought immediately.

**HOW LONG WILL I BE SICK?**
The length of the illness varies greatly from person to person. About one-third of college students who have mono never need to stay in bed because their case is so mild. They may even be able to go about their usual activities because the only effects of the diseases are enlarged lymph nodes, lab changes, and perhaps minor sore throat and fatigue. If your symptoms do keep you in bed, you should be up and around within two weeks. In a few cases there is a protracted period of continued sore throat and fatigue, necessitating prolonged bed rest. The most important things to do while recovering are: *get proper rest, eat well, and take in adequate fluids.* Although the illness is often gone in two weeks, it can take two to three months to get back to your normal energy level.

**For More Information**
www.cdc.gov