

Title: My baby or child has bronchiolitis: an infection of the lungs

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Abstract: Bronchiolitis is a very common childhood infection of part of the lungs. A virus called respiratory syncytial virus, "RSV," causes it. There are common ways to diagnose bronchiolitis and treat the symptoms. However, there is no medicine that gets rid of the virus causing it. The handout describes how bronchiolitis is diagnosed and treated, ways to decreased spreading the infection, and possible complications.

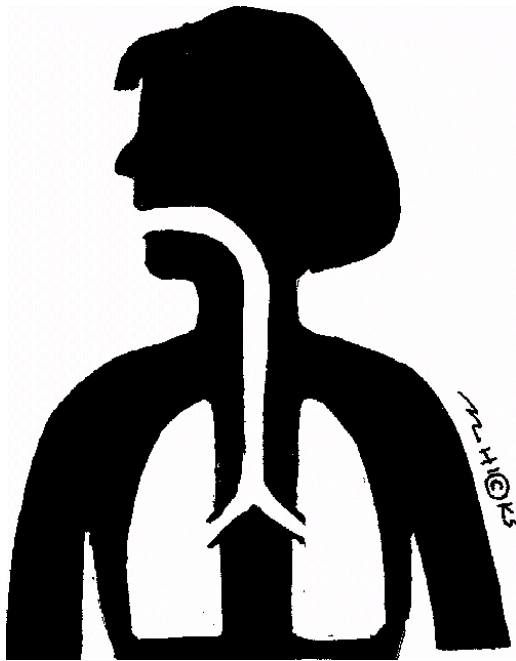
Research studies show that using antibiotics does not decrease length of illness for young children ≤ 2 years old with bronchiolitis. Research has shown there is a low risk of a child with bronchiolitis having an additional serious bacterial infection. This is usually true even even if the child has a fever or chest x-ray showing pneumonia. The harm of giving a child an antibiotic are side effects like diarrhea, possible allergy, and risk of making bacteria more resistant to antibiotics. When there is no benefit to giving antibiotics, it is not worth risking the possible harms.

Some children will get very sick from bronchiolitis and might need to be in the hospital for certain treatments. Some children with certain medical conditions get medicine to prevent bronchiolitis. Once in awhile children with bronchiolitis might also have an ear infection or urinary tract infection. Antibiotics do help these infections.

More children who have bronchiolitis when young will get asthma than children who do not have the infection, but no one knows why. The best way to prevent spreading the infection is hand-washing. Babies who are breast-fed and babies who are not around cigarette smoke have a lower chance of getting bronchiolitis.

This document was created by a medical student enrolled in the Primary Care Clerkship at the University of Minnesota Medical School as part of the course project. The aim of the project is to present information on a medical topic in the format of a patient education handout. It does not necessarily reflect the views of the University of Minnesota Medical School physicians and faculty. These materials are provided for informational purposes only and are in no way intended to take the place of the advice and recommendations of your personal health care provider. The information provided may no longer be up to date since it has not been reviewed since the date of creation. The information provided should not be used to diagnose a health problem or disease, or as a means of determining treatment. In the event of a medical emergency, immediately contact a doctor or call 911.

My baby or child has
BRONCHIOLITIS:
an infection of the lungs



A handout to tell you more about
this common childhood illness

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What is bronchiolitis?

This is a type of infection, most often **caused by viruses, usually "RSV"** (respiratory syncytial virus). It is very common in children. Most children are under 6 months old and usually less than 2 years old. The bronchioles, part of the lower lungs, get sick. **They react with inflammation--** by making a lot of mucus and getting smaller and swollen.

What are common symptoms?

- nose that's runny and stuffed up
- cough
- shortness of breath or faster breathing
- wheezing or high-pitch sounds
- fever

How is it diagnosed?

Usually doctors or other health care providers **know by hearing about the child and doing a physical exam** that he or she has bronchiolitis. They might take some mucus from the nose to test if RSV caused it. They might check **how much oxygen is in the blood** with a simple monitor on your child's finger or forehead. They **usually do not need to do x-rays or blood tests.**



When should I go back to the clinic?

You should call or go see a medical provider if your child is:

- flaring the nostrils
- pulling the chest in a lot with breathing ("retractions")
- acting really tired or really fussy
- having high fever
- not able to eat
- not having a wet diaper at least every 8 hours



WHEN TO CALL 911.

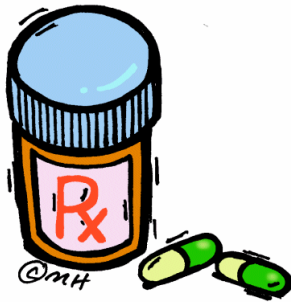
Call right away if your child:

- **stops breathing**
- **turns blue** (lips, fingers)
- **has strange jerking** (possible seizure)

How will my child get better?

The body has to clear a virus on its own. **There is no kind of antibiotic or medicine to get rid of the virus.** Your doctor might give treatments for the symptoms. This might include:

- **Suctioning** nasal secretions
- **Medicine for fever**
- Nebulizer or inhaler breathing treatments
- Your doctor may give antibiotics if your child also develops a bacterial infection, such as ear infection or urinary tract infection.

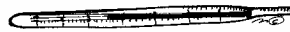


How long until my child gets better?

Usually the worst part of bronchiolitis infections **lasts about 10 days to 2 weeks.** Your child might have mild cough, runny nose, and be more tired for a few weeks. Every child is different; **call your doctor if your child is not getting better after 2 weeks or if your child is getting worse at any time.**

Does this mean my child will have asthma?

Babies and children with bronchiolitis are more likely to develop asthma when they get older. No one knows if bronchiolitis causes asthma or if children who will have asthma no matter what get bronchiolitis more often.



Will my child have to go to the hospital?

Some children with bronchiolitis, especially babies, do need to get hospitalized.

Reasons to be in the hospital include:

- **extra oxygen**
- **frequent breathing treatments**
- an **IV for medicines or fluids** (if child cannot eat enough and is dehydrated)
- **extra monitoring**, especially if child is <12 weeks old, was born premature, or has heart disease.



How can I prevent bronchiolitis?

Most bronchiolitis viruses are spread by droplets from the mouth or nose of infected people. The **best thing to do is wash your hands** to prevent spread between people. Have others near your child do the same. You can use soap or alcohol-based rubs.

★ **Children who are breast-fed and who are not around cigarette smoke all have a lower chance of getting bronchiolitis.** ★

Certain children who were born premature or who have heart disease take medicine to prevent RSV bronchiolitis. Ask your provider if this includes your child.

Sources used:

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