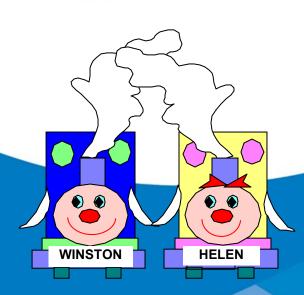


# **Bronchiolitis**

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**Author:** Paediatric Department **Document Number:** STHK1532

Version: 5

**Review date:** 01 / 10 / 2023

### What causes Bronchiolitis

- Bronchiolitis is usually caused by a virus called the Respiratory Syncytial Virus (RSV).
   Other viruses can also cause Bronchiolitis. RSV is a common cause of colds for older children and adults.
- In some infants it can also infect lower down the airways causing a more severe illness.

## Nature and reasons for the condition

- Bronchiolitis is an inflammation (swelling) of the smaller breathing passages in the lungs called the bronchioles. They become inflamed and are more swollen and stickier with secretions.
- It is common in babies and young children under the age of two and usually occurs in the winter months.
- Most affected babies are not seriously ill and make a full recovery. Sometimes it becomes more serious and hospital care is needed.
- Symptoms usually get worse over a period of about five days, then gradually improve and settle within a week or two.
- Some babies are more at risk of developing a more severe infection, especially if they
  were born prematurely, have heart or lung disease, or babies who are exposed to
  cigarette smoke.

# What are the symptoms of bronchiolitis

- Cough and cold symptoms, and your baby may have a temperature for the first 2-3 days.
- Fast breathing, your baby may sound short of breath and sometimes wheezy.
- Your baby may have to work harder to breathe, the nostrils may 'flare' and you may be able to see the muscles between the ribs suck in during each breath.
- They may have difficulty feeding and taking longer to feed. This is because your baby may
  be finding it hard to feed and breathe at the same time. Your infant may also have a
  blocked nose.
- Vomiting may occur due to coughing spasms and also because your baby may be swallowing mucus from the lungs.
- Your baby may have difficulty sleeping and be irritable.
- Premature and very young babies may have episodes where they briefly stop breathing (called apnoea).

## Our usual form of treatment

As Bronchiolitis is a 'self limiting' illness, it will normally go as the immune system clears the virus.

There is no medicine that will kill the virus and antibiotics do not work against a virus.

Bronchiolitis is very infectious and is spread the same way as a cough and cold. The germs can spread in tiny drops of fluid from the nose and mouth.

Airborne with sneezing, coughing and laughing. Droplets on used tissues, toys, clothing and furniture. We advise that visiting is kept to a minimum whilst your child is in hospital to prevent the spread of the droplets which could infect other babies and children.

# Treatment is usually supportive and aimed at helping the symptoms.

- Your baby's breathing rate and pulse will be monitored, also oxygen levels using a monitor attached to the hand or foot.
- If the oxygen levels are below 92% they will be given oxygen, either through the nose with small tubes (nasal cannula) or a head box. Sometimes baby may need extra support with their breathing and require 'Optiflow/Airvo' this is oxygen with a high flow to allow the lungs to stay open and by doing this its less of a struggle for baby to breathe.
- It may help if your baby is nursed in an upright position, either in a car seat or with the top of the cot elevated.
- Feeding will be monitored and small frequent feeds given. If your baby is not taking at least half their normal feeds they may need help with feeding. Your baby may have a small tube passed through the nose and into the tummy and fed this way.

Investigations such as a chest x-ray and blood tests are not usually done, unless your child is very unwell. The Consultant may request a Naso pharyngeal aspirate (NPA) which is a small sample of your infant's secretions (mucus) taken from the back of the nose. If requested this will be sent to a laboratory to check if the virus can be identified.

# **Support**

We understand seeing your baby unwell is an upsetting time and seeing you baby being attached to monitors and tubes can be scary. The nurse and doctor looking after your baby will have lots of experience, hints and tips to help your child so it is important for you to talk to them and share your concerns and worries, they've probably heard it all before, so your question won't be a 'silly question'.

## **Benefits of treatment**

Your child will recover much quicker if treatment is started early.

## Prevention

The RSV virus that commonly causes bronchiolitis is very common and impossible to totally avoid. However some measures may help.

- Avoid contact with people with coughs and colds.
- Wash hands before and after handling your baby.
- Keep infants and children in a smoke free environment.
- Do not share toys.

## **Discharge**

- Your baby will be discharged home when they are feeding orally and have not needed oxygen for 12-24 hours.
- May still have a runny nose and cough for at least two weeks.
- Some infants can continue to cough and wheeze for some time following recovery

If you have any further questions, please contact your child's consultant via their secretary via the hospital switchboard. The secretaries are available Monday to Friday 9.00 am to 5.00 pm

If you need to contact the Department outside of these hours please phone either:

Ward 3F 0151 430 1616 Ward 4F 0151 430 1791

Whiston Hospital Warrington Road, Prescot, Merseyside, L35 5DR Telephone: 0151 426 1600

