

FACTSHEET

This fact sheet is for education purposes only. Please consult with your doctor or other health professionals to make sure this information is right for your child. If you would like to provide feedback on this fact sheet, please visit: www.schn.health.nsw.gov.au/parents-and-carers/fact-sheets/feedback-form.

Bronchiolitis

What is bronchiolitis?

Bronchiolitis is a common chest infection in young children. It usually causes a flu like illness that affects infants in the first year of life. It is caused by several different viruses. Bronchiolitis occurs frequently in the winter months and rarely in summer.

The virus infects the small breathing tubes (bronchioles) of the lungs. This causes them to become narrowed by mucus and inflammation.

How does the illness develop?

The illness begins as a cold. After a day or so, your baby begins to cough, and the breathing becomes fast and sounds noisy (wheezing). This fast, wheezy breathing can make it difficult for your baby to feed. Some children may need to be admitted to hospital because of these problems.

The first symptoms your baby may have are the same as a common cold. These symptoms last one to two days and include:

- a runny nose
- a mild cough

They are followed by an increase in problems related to breathing, such as:

- fast breathing
- poor feeding
- noisy breathing (wheezing)
- drawing in of the chest with each breath
- fever

What can I expect once my baby becomes ill?

Babies with bronchiolitis are usually worse on the second or third day and are often sick for 7 to 10 days. The cough may continue for up to 2 to 4 weeks.

Are tests needed to diagnose bronchiolitis?

A chest X-ray is not recommended as it has been proven that it does not help with the management in infants presenting with bronchiolitis. Blood tests are generally not helpful.

Are there any medications that may help?

Medicines do not usually help babies with bronchiolitis.

- Antibiotics are not given because bronchiolitis is caused by a virus and antibiotics do not cure viruses.
- VentolinTM, AtroventTM or other puffers are not prescribed as these have been proven not to help as the wheezing is not related to asthma.
- Steroids such as PredmixTM or cortisone based medicines also do not help.

What else can I do for my baby?

Babies need to rest and have small frequent feeds so they don't get too tired when feeding and do not get dehydrated.

Home management

Most babies with bronchiolitis can be managed at home.

- Do not smoke in the home or around your baby. This is especially important around babies with any breathing problems.
- Encourage your baby to rest.
- Give shorter breast feeds/formula/water more frequently. This way your baby does not get too tired when feeding. If your child does not get enough fluids they can get dehydrated.
- You can give Paracetamol (eg. PanadolTM, DymadonTM, PanamaxTM) if your baby has a temperature and is unsettled.
- Avoid contact with other babies in the first few days, as bronchiolitis is an infectious disease.
- Hand washing helps with the prevention of spread of the virus.

If your baby is distressed and having trouble feeding they may need to be admitted to hospital.

Hospital management

Staff may need to:

- Watch them closely to make sure they do not become more unwell.
- Give them some extra oxygen.
- Give them extra fluids through a tube placed through the nose into the stomach or a drip into a vein.

Will it happen again?

Maybe. It is possible to have bronchiolitis again, but most babies will only have it once.

Children exposed to second hand smoke are more likely to develop a range of illnesses including bronchiolitis, compared to children living in smoke-free environments.

If you do smoke, you can choose not to smoke in front of children, particularly in enclosed areas such as the car and home. Ask others to do the same.

When to see your doctor

Go to your nearest doctor or emergency department if your baby:

- has difficulty breathing (very fast or not regular breaths).
- cannot feed normally because of coughing or wheezing.
- turns blue or has skin that is pale and sweaty.

Make an appointment for your baby to see a doctor if:

- they have a cough that is getting worse.
- they have less than half their normal feeds or are refusing food or drinks.
- they seem very tired or are more sleepy than usual.
- you are worried in any way.

Remember:

- Babies need to rest and drink small amounts more often or have more frequent breast feeds.
- Bronchiolitis is an infectious disease in the first few days.
- It is more common in babies under 6 months.
- Babies usually get better in 7 to 10 days but the cough may continue for up to 2 to 4 weeks.
- It is a viral infection, so antibiotics will not help.
- Smoking in the home increases the chance of babies having bronchiolitis and will make it worse.
- See your doctor if your baby has difficulty with breathing, feeding or sleeping.

Republished in part with permission from Paediatric Research in Emergency Departments International Collaborative (PREDICT), 15/08/2017.