



Bronchiolitis

A parent's guide

What are the symptoms?

- It starts like a normal cold, although not many colds develop into bronchiolitis.
- Over one to two days a child may develop a runny nose, irritating or distressing cough which can lead to vomiting, and wheezy breathing.
- They may have difficulty feeding, so give your baby small, frequent feeds.

Post hospital care

- Once you have been seen by one of our doctors or nurses you will be discharged home.
- Most babies make a quick recovery, taking one to two weeks to recover fully. They may have a mild cough and sniffles lasting up to two months.
- There is usually no long term damage to the lungs.
- On average, those children that require admission are ready to go home after three days, when they are feeding and breathing well
- Contact your GP for a follow up if required. Please do not come back to A&E unless your child's condition is worsening, or unless they are triggering red on the traffic light overleaf.

Useful resources/contacts

- Your local pharmacy - www.nhs.uk.
- Your GP surgery: please contact your GP when the surgery is open, and call 111 when the GP is closed.
- NHS 111 provides advice for urgent care needs and is open 24hrs a day. They can arrange urgent GP appointments and calls from landlines and mobiles are free.
- NHS Choices - www.nhs.uk.
- www.whittington.nhs.uk.

Patient advice and liaison service (PALS)

If you have a compliment, complaint or concern please contact our PALS team on 020 7288 5551 or whh-tr.whithealthPALS@nhs.net

If you need a large print, audio or translated copy of this leaflet please contact us on 020 7288 3182. We will try our best to meet your needs.

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Whittington Health NHS Trust
Magdala Avenue
London
N19 5NF
Phone: 020 7272 3070
www.whittington.nhs.uk

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Introduction

Bronchiolitis is the inflammation of the tubes in the lungs, which causes sticky fluids to be produced. About 10% of babies will get bronchiolitis before their first birthday. It can also affect children up to two years. Babies who are very young, born premature or have a previous lung or heart problem are likely to be more severely affected.

When to worry?

- If you are concerned your child's condition is worsening, please follow the traffic light advice.
- If your child is under 8 weeks old (or pre immunisations), seek help immediately.
- If your child is under 12 weeks old, contact your GP or call 111 for urgent advice.

What causes it?

- It is caused by a virus, and is most common in winter and early spring. It is infectious, so it can be passed from one person to another by droplets of saliva, or droplets from a runny nose as with an ordinary cough or cold.
- An older person with the virus may only have mild signs of a cold. It is more serious in a baby.

Treatment in hospital

- If the oxygen in the blood is low; your baby will be given some extra oxygen to breathe
- If your baby is not feeding well a small tube may need to be inserted to feed them directly.
- If it is necessary for your child to stay in hospital, you can stay with them all the time.

You need EMERGENCY help in your local Accident & Emergency – call 999

- Your child becomes unresponsive or very difficult to rouse.
- They are struggling to breathe - breathing very fast or very slowly.
- They are using their accessory muscles to breathe; signs of this include sucking in at the ribs when breathing in, nasal flaring, head bobbing and a grunting noise.
- Pale in colour, any signs of blueness to the lips and mouth
- Unable to feed due to tiredness/ lethargy and becoming increasingly weak.

You need to contact a doctor / nurse today. Ring the GP, if they are closed call 11

- Your child is not improving despite intervention and you are generally worried.
- Your child is not drinking and has signs of dehydration, which include dry mouth, no tears, sunken/darken eyes.
- Your child is having reduced feeds; they should be taking more than 50% of their usual volume.
- Your child is having some mild – moderate increased respiratory effort, breathing slightly faster or deeper than normal. This should ease when they are asleep.
- Your baby is under 12 weeks old and is becoming more sleepy
- Your child has on-going fevers

Self-Care – use advice on this leaflet, contact 111 or NHS choices for advice

- Your child reacts well to calpol or ibuprofen, you can administer this regularly for the duration of their illness.
- Your child has been happy, interactive and playing as usual.
- Your child is eating and drinking, they may still have vomiting and diarrhoea, however they are drinking a larger volume of fluid than they are losing.

- Most babies do not need any medicines and will recover well without them
- If the illness is more severe, your baby may need blood tests. Sometimes antibiotics are given if a bacterial infection is suspected.
- It is important that anyone touching your baby should wash their hands to prevent spreading the infection.
- Please avoid smoking near your child Research has shown that inhaling smoke can cause further irritation to your baby's chest