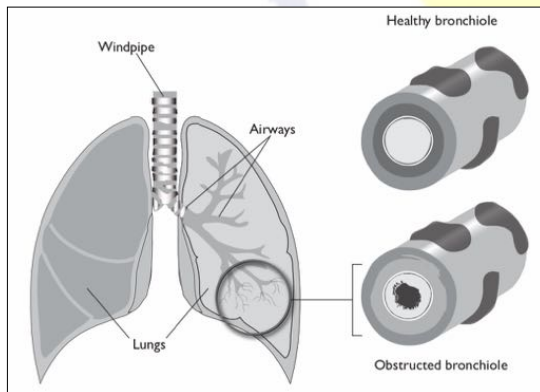


What is bronchiolitis?

Bronchiolitis is when the tiniest air passages in your baby's lungs become swollen. This can make it more difficult for your baby to breathe. Usually, bronchiolitis is caused by a virus called respiratory syncytial virus (known as RSV).

Almost all children will have had an infection caused by RSV by the time they are two. It is most common in the winter months and usually only causes mild 'cold-like' symptoms. Most children get better on their own.

Some babies, especially very young ones, can have difficulty with breathing or feeding and may need to go to hospital.



Can I prevent bronchiolitis?

No. The virus that causes bronchiolitis in babies also causes coughs and colds

in older children and adults so it is very difficult to prevent.

What are the symptoms?

- Bronchiolitis starts like a simple cold. Your baby may have a runny nose and sometimes a temperature and a cough
- After a few days your baby's cough may become worse
- Your baby's breathing may be faster than normal and it may become noisy. He or she may need to make more effort to breathe
- Sometimes, in very young babies, bronchiolitis may cause them to have brief pauses in their breathing
- As breathing becomes more difficult, your baby may not be able to take the usual amount of milk by breast or bottle. You may notice fewer wet nappies than usual
- Your baby may be sick after feeding and become irritable

How can I help my baby?

- If feeding is difficult, try breastfeeding more often or offering smaller bottle feeds more often
- If your baby has a temperature, you can give him or her paracetamol (for example, Calpol or Disprol). You must follow the instructions that come with the paracetamol carefully.

If you are not sure, ask your community pharmacist if paracetamol is suitable for your baby, and what dose you should give

- If your baby is already taking any medicines or inhalers, you should carry on using these. If you find it difficult to get your baby to take them, ask your doctor for advice
- Bronchiolitis is caused by a virus so antibiotics won't help

Make sure your baby is not exposed to tobacco smoke. Passive smoking can seriously damage your baby's health. It makes breathing problems like bronchiolitis worse.

How long does bronchiolitis last?

- Most babies with bronchiolitis get better within about two weeks. They may still have a cough for a few more weeks
- Your baby can go back to nursery or daycare as soon as he or she is well enough (that is feeding normally and with no difficulty breathing)
- There is usually no need to see your doctor if your baby is recovering well. If you are worried about your baby's progress, discuss this with your doctor or health visitor

Looking after your child with BRONCHIOLITIS



Parent Factsheet
Royal Hospital for Children
Glasgow

- If your baby needs help with feeding, he or she may be given milk through a feeding tube. This is a small plastic tube which is passed through your baby's nose or mouth and down into his or her stomach. It is kept in place by taping the tube to your baby's cheek. The tube will be removed when your baby is able to feed again.
- Your baby will probably only need to stay in hospital for a few days. You will be able to take your baby home when he or she is able to feed and doesn't need oxygen any more.

Will it happen again?

Your baby is not likely to get bronchiolitis again, although occasionally it can happen.

Are there any long-term effects?

Your baby may still have a cough and remain chesty and wheezy for some time but this will settle down gradually.

Bronchiolitis does not usually cause long-term breathing problems.

Disclaimer:

The medical information provided in this factsheet is for educational purposes only. This information should not be used as a substitute for the medical care and advice from your doctor. You should always contact your doctor if you are worried about your child's health. Your own doctor may recommend other treatments based on your child's individual circumstances.

When should I get advice?

Contact your GP if:

- you are worried about your baby
- your baby is having difficulty breathing
- your baby is taking less than half his or her usual feeds over two to three feeds, or has no wet nappy for 12 hours
- your baby has a high temperature
- your baby seems very tired or irritable

Dial 999 for an ambulance if:

- Your baby is having a lot of difficulty breathing and is pale or sweaty
- Your baby's tongue and lips are turning blue
- There are long pauses in your baby's breathing

At hospital, doctor or nurse will examine your baby and check your baby's breathing using a special machine called a pulse oximeter. This is a light-probe which will usually be wrapped around your baby's finger or toe. It measures the oxygen in your baby's blood, and helps doctors and nurses to assess your baby's breathing.

- If your baby needs oxygen, he or she will need to stay in hospital