

Let's Talk ABOUT...

Bronchiolitis and RSV

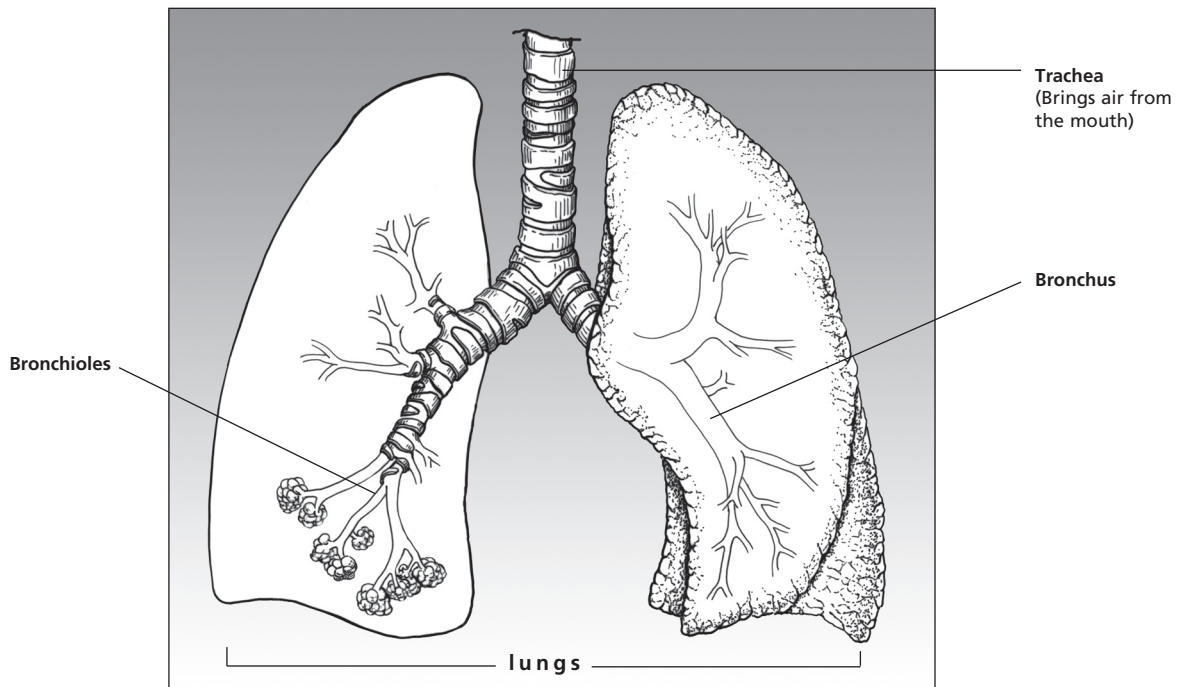


Figure 1

What is bronchiolitis?

Bronchiolitis is an infection of small airways in the lungs. When you breathe in air, it goes down to your lungs and into tubes that look like branches on a tree. There is a big tube called the bronchus (BRONG-kus). From there, it goes into smaller tubes, called bronchioles (BRONG-kee-ohls) (see Figure 1). Bronchiolitis (brong-ee-o-LITE-us) is when the bronchioles get infected. This condition is often confused with bronchitis (brong-I-tis), which is an infection of the bigger tubes in the lungs.

Bronchiolitis happens most often in children under age two. It is always caused by a virus. The infection causes the small airways in the lungs to swell. This blocks the flow of air through the lungs and makes it hard for your baby to breathe. RSV is the most common of viruses that cause bronchiolitis. Other viruses include human metapneumo virus, Influenza A and B, and other viruses as well.

What is RSV?

RSV is short for Respiratory Syncytial (sin-SIH-shal) Virus. RSV symptoms often look like the common cold, with a stuffy or runny nose and a slight cough. RSV tends to be more severe than a cold, and can develop into bronchiolitis or pneumonia (see *Let's Talk About... Pneumonia*).

In adults and older children, RSV may never get worse than a "cold." However, in children younger than two years, the illness can be so serious the child must be admitted to the hospital.

Babies under three months of age and those who were born with health problems tend to become sicker with RSV. Children with heart or lung problems are more likely to be admitted into the hospital if they are infected. It is possible to get RSV more than once, but symptoms are usually milder with later infections.

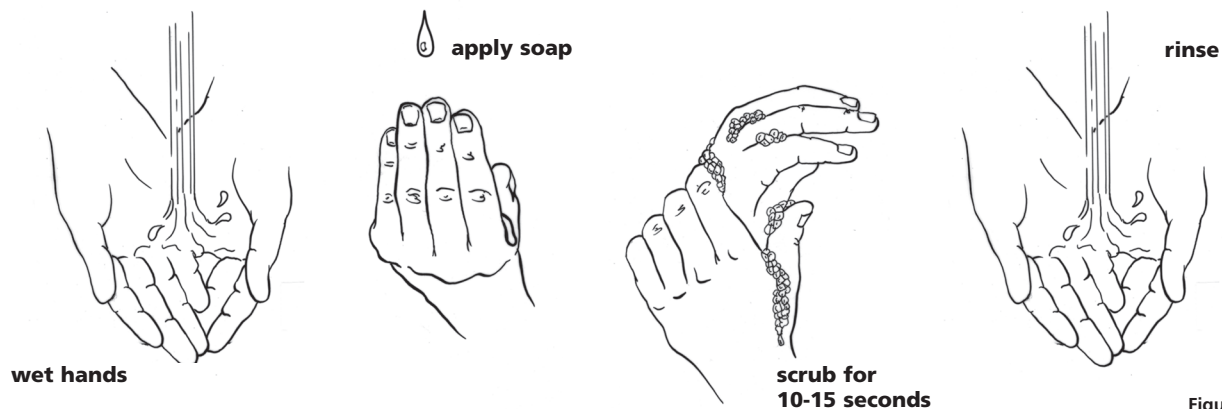


Figure 2

How does a child become infected?

A child becomes infected with the virus by having contact with another infected person. The RSV virus and other viruses that cause bronchiolitis are contagious. Coughing directly into a person's face, sharing drinking glasses, or even sharing toys can spread viruses. A child can stop the spread of the disease by washing his hands after sneezing, coughing, or blowing his nose. RSV can live several hours on surfaces like handrails and toys. An infected person can spread a virus for up to three weeks.

How can I help prevent respiratory infections like bronchiolitis?

- Wash your hands often. Frequent hand washing is the most effective way to prevent the spread of infections. The correct method is to apply soap to wet hands and scrub hands vigorously for 10 to 15 seconds before rinsing (see Figure 2).
- Wash your hands before holding a baby, especially if you have been in a public place or around people who are ill.
- Insist that people wash their hands before holding or touching your baby.
- Do not allow babies to play with ill children.
- Keep young babies away from places where they will have contact with people who are ill, such as movie theaters, malls, and even church meetings and nurseries.

- Wash dishes in hot, soapy water to kill the virus.
- Do not smoke around your baby.
- If possible, limit use of wood fireplaces and wood-burning stoves around your children.

The best way to prevent respiratory infections is to wash your hands often and thoroughly.

What does bronchiolitis look like?

A baby who gets bronchiolitis often starts off with signs of a cold, such as a runny or stuffy nose, a mild cough, and a fever. After a day or two, the cough may get worse. **The following signs may mean that your child is having trouble breathing:**

- He may begin to breathe faster.
- He may widen his nostrils and squeeze the muscles under his rib cage to try to get more air in and out of his lungs.
- He may grunt and tighten his stomach muscles when he breathes.
- He will make a high-pitched whistling sound, called a wheeze, each time he breathes out.
- He may not drink fluids well because he is working so hard to breathe that he has trouble sucking and swallowing.
- If it gets hard for him to breathe, you may notice a bluish tint around his lips and fingertips. This tells you that his airways are so blocked, there is not enough oxygen getting into the blood.

If your baby shows any signs of having trouble breathing, or if his fever is over 100.4°F (38°C) and lasts more than 24 hours (or is present at all in a baby under 3 months of age), call your doctor.

What can I do to help my child?

Try the following suggestions to relieve a stuffy nose and fever:

- Clear your baby's nose with a suction bulb. See the *Let's Talk About... How to use a suction bulb* for directions.
- Make your child's mucus thinner by using mild salt-solution nose drops. Buy drops recommended by your doctor—do not try to make this yourself. Never use over-the-counter nose drops that contain any medicine.
- If your baby has a fever, give him acetaminophen (Tylenol®). Be sure to follow the recommended dose for your child's age. Do not give aspirin to your child. Aspirin has been associated with Reye's syndrome, a disease that affects the liver and the brain. Never give him any other kind of cold medicine without first checking with your doctor.

If your child is having a lot of trouble breathing, he may be admitted to the hospital.

What will happen in the hospital?

Your child's doctor and nurses will watch his condition and help him to breathe better. The doctor may give your child:

- Acetaminophen (Tylenol®) or ibuprofen (Motrin®) for fever.
- Oxygen by a nasal cannula to get enough oxygen into his blood.

- A medicine-mist treatment to help him breathe.
- Special heart and lung monitors.

Your child will probably have a large amount of thick mucus. He cannot blow his nose, so his nurse and respiratory therapist will help him. They will clear his nose, mouth, and the back of his throat with a suction bulb or catheter (KATH-et-er).

Your child's doctor, nurse, and respiratory therapist will listen to your baby's lungs often. By listening to his breathing, they can tell when he needs suctioning or medicine, and if he is getting better.

How long will my child be in the hospital?

How long your child is in the hospital depends on how sick he is and if he has any other health problems.

Are there medicines that can help?

Antibiotics, which treat bacteria, are not helpful for bronchiolitis because bacteria does not cause bronchiolitis. There is a medicine for RSV that is given to infants who are at high risk for infection. Talk to you doctor to see if your child needs this treatment. It is recommended that babies over six months receive the flu vaccine. See *Let's Talk About... Flu and Flu vaccination*.

If you have more questions or concerns about bronchiolitis or RSV, call your child's doctor.