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Going Home with Viral Induced Wheeze

1st 24 hours after discharge

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|---|--|
| Reliever: Give 10 puffs every 4-6 hours | What if my child needs their reliever more often? <ul style="list-style-type: none"> • Give the reliever as often as you think it's needed • AND get urgent medical advice What do I do if my child is sleeping? <ul style="list-style-type: none"> • Continue to take the inhaler as required, can use face mask which may not wake the child if asleep |
| Preventer: | |
| Steroid tablets: | |

Days 2-3

If improving:

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|---|
| Reliever : Cut to 2 - 5 puffs every 4-6 hours |
| Preventer: Give agreed dose |
| Steroid tablets: |

How will I know if my child is improving?

- **Breathing will be quieter, slower & easier**
- **Less cough & wheeze**
- **Eating, drinking & talking better**

Can I cut down the number of puffs of the reliever?

- **Yes, as your child improves cut down the number of puffs and then increase the time between**

If not getting better:

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|--|
| Reliever: Keep giving 10 puffs every 4-6 hours |
| Preventer: Give agreed dose |
| Steroid tablets: |

How will I know if my child is getting worse?

- **Faster breathing or too breathless to walk or play**
- **Cannot talk or feed easily**
- **Skin colour may become pale or grey**

What should I do if my child does not seem to be getting better?

- **Get medical advice**
- **In the meantime, continue giving reliever as often as you think it's needed**

Day 4

If fully recovered:

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|---|
| Reliever: Give 2 puffs as required |
| Preventer: Give agreed dose |
| Steroid tablets: |

How do I know if my child is fully recovered?

- **Child will have no cough or wheeze**

If not getting better:

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|---|
| Reliever: Keep giving 10 puffs every 4-6 hours |
| Preventer: Give agreed dose |
| Steroid tablets: |

What do I do if my child is not better by day 4?

- **Continue giving reliever as often as you think it's needed**
- **Get medical advice**

Doctors signature:

Nurses signature:

Date:

It is advisable to make an appointment to see your GP or Practice Nurse in about 2 days time.

Ward 15, Borders General Hospital, 01896 826015

Viral Induced Wheeze

Information for parents and carers

What is viral induced wheeze?

- A wheeze/whistling sound that is caused by a viral infection (cough or a cold), creating swelling and sticky mucus (phlegm) which clogs the airways, making it harder to move air in and out. The wheeze should improve as the viral infection gets better.
- The wheeze may return each time your child has a cold.
- Usually your child is well in-between viral infections.
- Children aged between six months and five years are more likely to be affected as their breathing tubes (airways) are smaller compared to older children and adults. Symptoms should improve as your child gets older and usually disappear by about six years of age.

Does this mean my child has asthma?

- Viral induced wheeze is common, affecting 50% of children under the age of six years at some point. About 4 in 10 children will go on to develop asthma
- Children with asthma are often wheezy, even when they do not have a cough or cold.
- Children with asthma often have a family history of asthma and/or allergy.

Doctor and nurses may not officially 'label' a young child as having asthma, as the majority of children with viral induced wheeze will 'grow out' of their symptoms by school age.

What treatment will my child need?

The doctor or nurse may prescribe an inhaler called salbutamol, which is blue in colour and often referred to as a '**reliever**' inhaler. This inhaler contains medicine which will relax your child's airways and relieve the wheezy symptoms.

Occasionally your doctor or nurse may prescribe another type of inhaler, which is usually brown in colour and is taken every day even when your child is well. This inhaler is often referred to as a '**preventer**' inhaler and is more often prescribed if your child has symptoms of cough and wheeze in-between viral infections. Inhalers in this age group should **ALWAYS** be given using a spacer device and your doctor or nurse will show you how to use this correctly.

What will I do if my child has a further wheezy episode?

During a cold your child should have regular reliever (blue) inhaler. The recommended dose is **4 puffs 4 times a day for 4 days** when symptoms are at the worst.

What if my child has a severe attack of wheezing?

You may notice your child's breathing is a real effort (e.g. chest, tummy or neck muscles pulling in with each breath). If this happens and your child is breathless or distressed after their normal dose of reliever inhaler (2-4 puffs), an emergency dose is required. This can be given as: **10 puffs through the spacer device (Give 1 puff every minute for 10 minutes).**

This is an emergency dose of the medicine and if you need to repeat it within 4 hours or give it twice in 24 hours at home, you need to seek urgent medical advice.

If your child cannot talk, is gasping for breath or has colour change, you must phone 999 for an ambulance and continue to give 1 puff of the blue inhaler every minute until help arrives.