

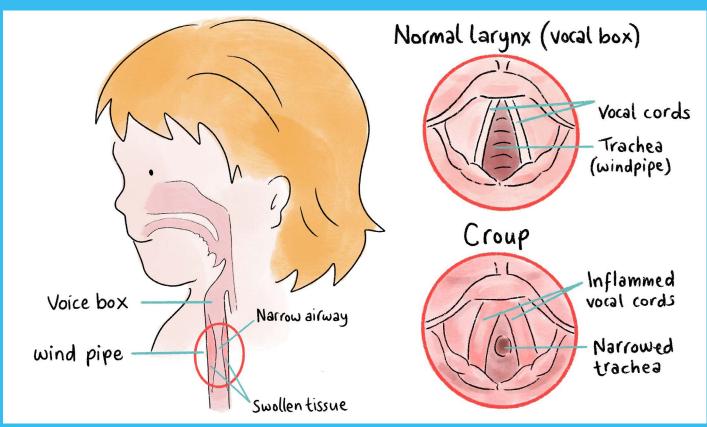


Croup Information for parents and carers

Key facts

Croup is an infection of the larynx (voice box), trachea (windpipe) and lungs (the bronchi) causing them to swell and become narrower.

- Most commonly occurs between one and three years
- Usually caused by a virus
- Symptoms are often mild but occasionally can be severe and need a hospital stay for observation
- Most children admitted to hospital come home within 24 hours



Symptoms of Croup



Runny nose

May follow a cold but not always



Coughing

Usually harsh and barking



High temperature



Stridor

Noisy breathing due to swelling in the airways



Difficulty breathing



Sore throat & hoarse voice



Refuse food



General aches and pains



Often worse at night

Caring for your child at home

If your child does not have any red or amber symptoms in the traffic light advice then you can care for your child at home.

If your child is already taking medicines or inhalers, you should carry on using these.

Croup is caused by a virus, antibiotics will not help.

Breathing

Be calm and reassuring, small children can be distressed with croup and crying can make their breathing worse.

Sit your child upright on your lap if their breathing is noisy or difficult.

A stroll outdoors, carrying the child upright in the cool fresh air may help.

Pain or distress

If your child is in pain or distressed you can give them liquid paracetamol. If your child is over 6 months, you may also give ibuprofen.

At home, we do not recommend giving paracetamol and ibuprofen at the same time. If your child has not improved after two to three hours you may want to give them the other medicine. Never exceed the dose on the packaging.

Hydration

If your child is not feeding as normal, offer smaller feeds more frequently. If your child is breastfed, continue to feed on demand.

Make sure your child is never exposed to tobacco smoke. Passive smoking can seriously damage children's health. It can make breathing problems like croup worse.

Remember, smoke remains on your clothes when you smoke anywhere, including outside.



Treatments

Steroid medicines such as dexamethasone or prednisolone helps to reduce swelling and severity of breathing symptoms. A single dose often eases symptoms within a few hours.

Sometimes a second dose of steroid is required but it is unusual to require more than this.

DO NOT give medicines which contain ingredients that make a child drowsy, such as cough mixtures or antihistamines. This will not help a child who may need extra effort to breathe.

What to keep in your medicine cabinet

Keep the following items in your medicine cabinet ready for when you need them;

- Liquid Paracetamol (e.g. Calpol)
- Liquid Ibuprofen please note that if your child has been diagnosed with Asthma, Ibuprofen is not recommended unless discussed with your doctor first.

Never exceed the maximum dose for paracetamol and ibuprofen in any 24-hour period. Keep a diary of when you give each dose so that you do not give your child too much.

Please check the use-by dates and keep out of reach of children. These medicines are all available over the counter from a pharmacist. The pharmacy or supermarket own brands are cheaper and work just as well, if you are unsure, ask your pharmacist.

Children can change quickly and if at any time your child displays any of the 'Red' features in the box below you should seek EMERGENCY HELP.



RED

If your child

- has blue lips
- or is unresponsive or very irritable
- is struggling to breathe
 - pulling in of the chest or neck muscles
 - using tummy muscles
- or has unusually long pauses in breathing
- or has an irregular breathing pattern
- or is unable to swallow or is drooling
- is too breathless to feed or speak
- is unable to take fluids
- is pale, drowsy, weak or quiet

YOU NEED EMERGENCY HELP CALL 999

You need to be seen at the hospital Emergency Department



AMBER

If your child has any one of these features

- Appears to be getting worse or you are worried
- Restless or irritable
- Increased difficulty in breathing such as
 - Rapid breathing
 - Taking more effort to breathe
 - Flaring of nostrils
- Becoming unusually pale
- Temperature of 39°C despite paracetamol and/or ibuprofen
- Reduced fluid intake by half usual amount
- Passed urine less than twice in 12 hours
- Vomiting

SEEK MEDICAL ADVICE TODAY

Please call your GP surgery, or, if it is closed call NHS 111
Your GP may want to speak to you on the phone first to give you medical advice. They will arrange to see your child if it is appropriate.



If none of the features in the red or amber boxes above are present

SELF-CARE

Using the advice on this leaflet you can care for your child at home.

The most important advice is to keep your child well hydrated.

If you feel you need more advice, please contact your local pharmacy, Health Visitor or GP surgery.

You can also call NHS 111 for advice.

Important factors to consider

There are important factors to consider that may affect your child's ability to cope with croup. These are if your child:

- •was a premature baby
- •is less than 6 months old
- •has a lung problem
- •has a heart problem
- has a history of severe airway problems or previous severe croup
- a structural abnormality of the upper airway
- •has a problem with their immune system
- or any other pre-existing medical condition that may affect their ability to cope with illness

We recommend that in these circumstances you seek medical advice

How long does croup last?

Most children with croup will seem to worsen during the first 1 to 3 days of illness before beginning to improve over the next few weeks. A mild cough may go on for a few weeks.

Your child can go back to nursery as soon as they are well enough (feeding normally and with no breathing difficulties).

There is usually no need to see your doctor if your child is recovering well. If you are worried about your child's progress, seek medical advice.

Key points to remember

- Most babies and children get better within about two weeks.
- The cough can persist for up to 6 weeks
- Croup is caused by a virus, so antibiotics will not help
- Your child may need to take smaller feeds more often
- Speak to your doctor if your child has difficulty with breathing or feeding