Bronchiolitis
Information for Patients, Parents and Carers

What is it?

Bronchiolitis is an infection of the lower respiratory tract and is usually caused by an infection. The virus causes inflammation of the small airways and this inflammation causes the airways to become blocked with secretions. This results in a child wheezing which you may notice as they breathe out. The majority of children will be infected by the virus that causes bronchiolitis by the time they are 3 years of age.

Outbreaks of bronchiolitis occur between November and April each year, the majority occur in January or February.

Symptoms

Bronchiolitis usually develops after 1-3 days of symptoms of a common cold, they include;

- Nasal congestion and a runny nose
- Mild cough
- Fever above 38°C
- Reduced appetite

As the infection develops a child’s lower airways become affected and they develop other symptoms;

- Breathing faster, may also have difficulty breathing
- Wheezing
- Persistent cough
- Difficulty feeding which can lead to dehydration

Children who become very unwell may also have;

- Enlarged nostrils when they are breathing
- Their breathing may sound like grunting
- They can become very tired due to the amount of effort they use for breathing
How is it Spread?

The viruses which cause bronchiolitis are highly contagious and are passed into the air by breathing, coughing or sneezing. The viruses can then be spread for several hours.

If someone has the virus on their hands and touches a child’s eye, nose or mouth the child can then become infected. Adults with the virus can easily pass on to others.

Diagnosis

When a child is admitted to hospital with suspected bronchiolitis a swab may be taken from their nose to test for a number of viruses. Some results may be available the same day. Sometimes a chest x-ray may also be taken.

Treatment

Treatment will depend on your child’s symptoms. They may need intravenous fluids (a drip), oxygen may be needed if your child can not get enough oxygen from normal room air. This is usually given by placing a soft plastic tube under their nose (nasal cannula) or placing a mask over their nose and mouth.

Children who are unable to breath on their own have a tube placed in to throat, this is attached to a machine which will pump oxygen directly into their lungs (a ventilator). When the child’s condition improves the tube is removed.

How is it spread?

The viruses that cause bronchiolitis are easily spread, precautions must be taken to prevent spreading them to other patients or adults. For this reason we restrict the number of visitors. Regular hand washing or use of alcohol hand gel is essential to prevent the spread of the viruses.

Special Precautions

Children with RSV infection can continue to spread the virus for between 3 to 8 days. Returning to the crèche or childminder is acceptable one week after diagnosis or when symptoms have ceased.

Some children’s cough may last for a number of weeks despite the child being very well otherwise.

When possible, avoid close contact with children or adults who have colds to protect your child from the viruses which can cause bronchiolitis.