

Viral induced wheeze

Patient information leaflet

**If you need this leaflet in a different language or accessible format
please speak to a member of staff who can arrange it for you.**

اگر به این بروشور به زبان دیگر یا در قالب دسترس پذیر نیاز دارید،
لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formie,
proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotowuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil,
vă rog să discutați cu un membru al personalului să se ocupe
de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式，请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أخرى، أو بتنسيق
يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

Southport Hospital
Town Lane, Kew,
Southport, Merseyside,
PR8 6PN
Telephone: 01704 547 471

Ormskirk Hospital
Dicconson Way, Wigan Road,
Ormskirk, Lancashire, L39 2AZ
Telephone: 01695 577 111

What is a wheeze?

A wheeze is a whistling sound, which is heard when your child is breathing.

What is a viral induced wheeze?

A viral induced wheeze is caused by a viral infection, which usually starts with a runny nose or cough and is often associated with a high temperature. Some children get a little breathless, wheeze or have a rattly chest during or after a cold.

Why does it happen?

The viral infection may cause narrowing and swelling of the airways in the lungs. It is more common in pre-school children because their airways are smaller. A viral induced wheeze that always occurs alongside cough and cold symptoms, does not mean that your child has asthma.

What to look out for:

- Wheezing sounds.
- Shortness of breath.
- Increased effort of breathing.
- Faster breathing rate.

Important information

- If your child coughs, wheezes or has breathing difficulties when they are well.
- Regularly needs to use their rescue inhaler to relieve these symptoms.
- Wakes at night with a cough which is not related to illness.
- Has difficulty doing sports or activities due to their symptoms.

These are important signs and could suggest that your child has asthma. It is important to have your child reviewed by their GP practice.

Comments or suggestions

We hope you will have been happy with the care provided. Should you have any further comments or suggestions please contact the Paediatric Matron or Specialist Nurses' manager via the telephone contact number provided below.

Paediatric Matron & Paediatric Specialist Nurses Manager

Matron and Paediatric Specialist Nurses are available during the hours of: 8am to 5pm - Monday to Friday, and can be contacted via the hospital switchboard on:

01695 577 111 (Monday – Friday 08:00 – 17:00)

For appointments

Telephone (01695) 656 680

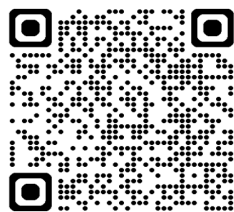
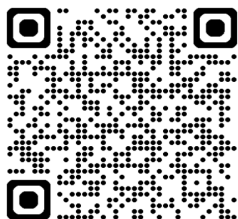
If your child has any of these symptoms you must seek medical advice immediately. If you feel it is an emergency you must dial 999 and:

- Give ten puffs of reliever inhaler (one puff at a time).
- Followed by one puff every minute until help arrives.

Encourage your child to sit up and try to keep calm. Always remember to use the spacer device provided.

If the ambulance has not arrived after 10 minutes contact 999 again immediately.

Asthma & Lung UK inhaler technique videos



Treatment

The salbutamol (blue) reliever inhaler is used to help relax the tight airways and relieve symptoms. It is breathed in through a device called a spacer, which you will be shown how to use for when you go home. Most children will recover from a viral induced wheeze quickly and will need minimal medical treatment. Occasionally, children need to stay in hospital for support with their oxygen level, or due to needing frequent treatment.

Treatment after hospital attendance

Your child is now being discharged home from the hospital as they are improving and can safely continue their recovery at home.

Check your child's breathing at least every 4 hours after discharge and use the inhaler only when they have symptoms.

If your child continues to have mild symptoms of cough, Wheeze or shortness of breath at home, you can use the salbutamol inhaler to relieve this.

When they have symptoms, give 2 puffs of the salbutamol inhaler, one puff at a time. Remember to shake the inhaler Well before each puff and encourage your child to inhale each Puff slowly and deeply 10 times.

If they still have symptoms after 10 minutes have passed, give a further 2 puffs and wait another 10 minutes, repeating the inhaler if needed until 6 puffs have been given.

If you feel your child needs more than 6 puffs, or the relief from the salbutamol does not last for 4 hours, then you must return to hospital for re-assessment.

Follow up

- The hospital will advise if follow up is needed.
- You may receive a follow up telephone call from the respiratory nurses within 2-3 working days of discharge.

Spacer care

- When you have finished using your spacer, carefully dismantle the device and soak it in warm soapy water.
- Do not rinse.
- Allow the spacer to air dry and return it to its box in case it is needed for future use.

Treatment with inhaler at home

Your child may have episodes of viral induced wheeze in the future, if this should happen please follow the advice below.

Mild symptoms: Give 2 puffs of salbutamol inhaler (one puff at a time) for cough, wheeze or shortness of breath.

If symptoms remain after 5-10 minutes, give a further 2 puffs and repeated as needed, until 6 puffs have been given.

If you have needed to use the blue reliever inhaler, check your child's breathing at least every 4 hrs.

You will give the inhaler less often as your child's symptoms reduce.

If needed, you can give up to 6 puffs of reliever inhaler every 4 hours, but you must arrange for a GP review at the earliest opportunity. If it is out of hours and you are concerned, ring your GP emergency number or 111 for advice, or attend A&E if necessary.

Give the inhaler **only** if they have symptoms.

Signs your child may be getting worse:

- Coughing or wheezing more than before.
- Using their tummy muscles to breathe.
- Becoming tired due to breathing effort.

If your child has any of the symptoms above or:

- Symptoms are not completely better after 6 puffs of the reliever inhaler.
- They need the reliever inhaler again in less than 4 hours.

You should seek urgent medical help.

Emergency signs / symptoms:

- Too breathless to talk.
- Pale, grey or blue around the lips.
- Very fast breathing.
- Using tummy muscles or severe tugging in at the neck or between the ribs.
- Becoming floppy or unresponsive.