

# **Viral Induced Wheeze**

## **Patient Information**

### **Children's Services**

Lincoln County Hospital

Pilgrim Hospital, Boston

Grantham and District Hospital

[www.ulh.nhs.uk](http://www.ulh.nhs.uk)

## **Aim of the leaflet**

This leaflet aims to tell parents and carers what a viral induced wheeze is and the treatment and management of the wheeze.

## **What is a viral induced wheeze?**

It is a whistling sound from your child's chest that is caused by a viral infection, for example an upper respiratory tract infection, cough or cold.

It may return each time your child has a cold.

It can persist for several weeks after the infection.

It usually affects children under 3 years of age as their air passages are small.

## **Treatment**

Antibiotics are ineffective against viruses and the illness will get better by itself once it has run its course.

Regular **paracetamol and ibuprofen** may be of benefit to your child until the symptoms settle down.

The doctor may also give your child treatment via an inhaler.

## **This does not mean your child has Asthma.**

Inhalers are a medicine that relaxes your child's airways and helps the wheezing to improve. It works by taking the medicine straight to the lungs and takes 5 to 10 minutes to work.

## **Management**

It is important your child drinks plenty of fluids. They should be taking at least half of their usual amount of drinks. Ice lollies, yogurts or ice cream can be a good way of giving fluids. Your child should avoid smoky atmospheres and inhaling tobacco smoke.

## **Medicines**

**Giving regular paracetamol and ibuprofen as prescribed by the doctor can be very effective in managing the worst of the symptoms.**

Paracetamol last given.....next dose of..... due.....

Ibuprofen last given..... next dose of.....due.....

**If the doctor has prescribed an inhaler follow the instructions below.**

### **Ventolin "Salbutamol" (blue inhaler)**

This is a bronchodilator and was last given at.....

Give .....puffs.....times a day for .....days

Then.....puffs.....times a day for .....days

## **Atrovent “Ipratropium bromide” (green and white inhaler)**

This is a bronchodilator and was last given at.....

Give .....puffs.....times a day for .....days

Then.....puffs.....times a day for .....days

**Always use the aerochamber/volumatic inhaler device when administering your child’s inhaler.**

### **Inhaler technique for orange and yellow aerochambers**

1. Shake the inhaler well and attach onto the end of the aerochamber.
2. Tilt the aerochamber downwards towards the child’s face placing the mask lightly over the mouth and nose to create a seal.
3. Squirt one puff of the inhaler into the aerochamber.
4. Hold in place until the child has taken 5 to 6 breaths.
5. Repeat procedure for each puff of inhaler required.

**Please ensure you feel confident in administering your child’s inhaler before you go home.**

### **Seek medical advice if:**

- Your child has a temperature that is not settled with regular paracetamol and ibuprofen.
- Your child becomes more sleepy or lethargic than their usual self and has not passed urine.
- Your child refuses to drink for 3 to 4 hours.
- The inhaler is not making the wheeze better.
- Your child is finding it hard to breathe.
- The effects of the inhaler lasts less than 2 hours.

Following discharge from the ward if you are concerned, it is important that your child is seen by a doctor. Telephone:

Safari Day Unit, Lincoln	01522 573172
Rainforest ward, Lincoln	01522 573786
Children’s Ward, Boston	01205 445563

## **References**

If you require a full list of references for this leaflet please email [patient.information@ulh.nhs.uk](mailto:patient.information@ulh.nhs.uk)

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