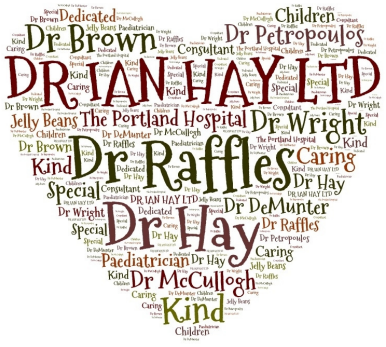

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PATIENT INFORMATION SHEET: **CROUP** (Laryngotracheobronchitis)

Croup is the lay term used to describe the breath sounds that children make when they have an upper airway infection that affects their larynx. Inflammation and swelling compromise the airway and breathing becomes noisy and difficult. Typically children have symptoms of a cold followed by fever, a harsh seal-like barking cough, noisy in-drawing of breath and, if the degree of obstruction is more severe, they may also have noisy and prolonged expiration. The condition is painful and the sense of choking can make children very distressed. They may become agitated and anxious and have distinctly laboured breathing.

The condition is caused by viral infections. The causative viruses occur commonly and include the Respiratory Syncytial Virus, Parainfluenza and Influenza viruses and the Rhinovirus. These viruses occur seasonally but are most prevalent in the Autumn and Winter.

The condition is usually self-limiting but care must be taken to ensure that complicating airway obstruction doesn't occur.

Most importantly children must be assessed for the degree of airway obstruction. This is done by performing a careful clinical examination to exclude other causes of airway obstruction, to determine the severity of obstruction and to assess the need for supplemental oxygen. If there is any delay in seeing a doctor it is safer for your child to be assessed at an Accident and Emergency Department.

Children with mild airway obstruction may be treated at home.

Swelling within the larynx is treated with a single dose of a corticosteroid medicine. Dexamethasone oral solution is most commonly used. The dose may be repeated after 12 hours depending on clinical response. Pain relief is important and as children are often reluctant to eat they should be helped to drink. Antibiotics are not indicated.

Children with moderate or severe airways obstruction need however to be kept under careful nursing supervision and may need to admitted for treatment to a short stay facility in hospital. Nebulised Adrenalin administration may be required for those with
severe obstruction and these children need more intensive monitoring.

The condition seldom lasts more than a two days and healing is complete

There are no vaccines to protect children against these viruses other than against the Influenza virus. Flu vaccine becomes available at the beginning of October

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