

## When should I seek Emergency help?

### Take your child to the DOCTOR when:

- Your child's cough is getting worse
- Your child is eating and drinking very small amounts
- Your child appears very tired or more sleepy than usual
- You have any concerns that your child's condition is getting worse

### Take your child to the HOSPITAL when:

- Your child has difficulty breathing
- Your child is not feeding or drinking
- Your child's skin is very pale
- Your child is not responding

**In an EMERGENCY dial 111 and  
ask for an ambulance**



## For further information please contact your local asthma society

### Asthma Auckland Donation Form

Contributors

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Amount Donated: \$ \_\_\_\_\_

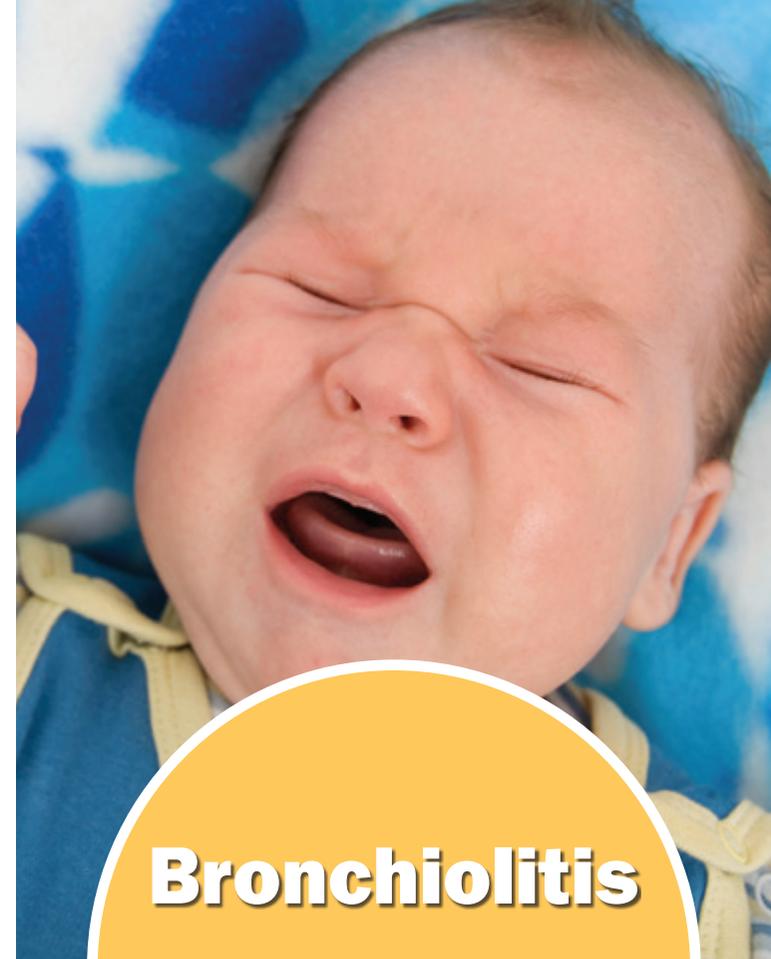
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Signature: \_\_\_\_\_



# Bronchiolitis

What is  
bronchiolitis?

**asthma**  
NEW ZEALAND  
THE LUNG ASSOCIATION

581 Mt Eden Road Auckland 1024  
PO Box 67066, Mt Eden, Auckland 1349  
Phone 09 623 0236, Fax 09 623 0774  
Email: anz@asthma.org.nz

[www.asthma.org.nz](http://www.asthma.org.nz)

Asthma New Zealand-The Lung Association © June 2016

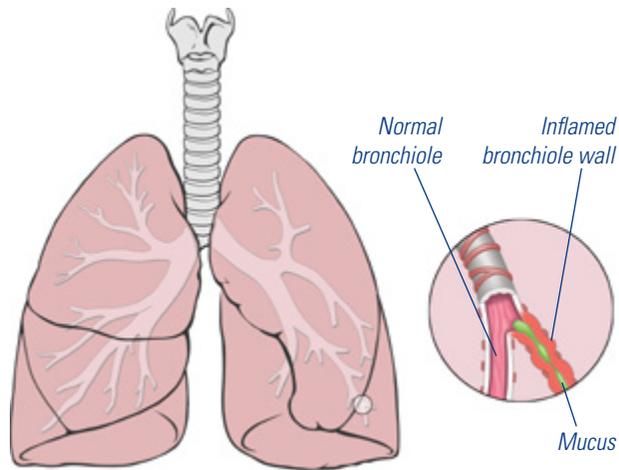


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## What is Bronchiolitis?

Bronchiolitis is a viral infection of the lower respiratory tract which predominantly affects children. It leads to inflammation and obstruction of the bronchioles and the airway.

The most common age is under 12 months, and younger infants are usually more severely affected. The peak of the illness is usually around the second or third day and lasts 7-10 days, although a cough may persist for several weeks.



### Epidemiology

Bronchiolitis is the most common lung infection in children under two. Around 18-32% of infants will develop bronchiolitis within their first year of life. Around 9-17% in their second year.

### Common Causes

Bronchiolitis is caused by a viral infection and is most commonly transferred by contact. The virus can be contracted through air droplets when someone sick coughs or sneezes. It can also be contracted by touching shared objects, and then touching your eyes, nose, or mouth.

## How can I tell if my child has Bronchiolitis?

<b>Cough</b>	Prevalent cough with wheezing when breathing.
<b>Reduced Feeding</b>	Child may eat and drink less than half of normal intake, and in severe cases may not eat at all.
<b>Increased Breathing</b>	Breathing is noticeably faster than normal. (Rate is normally 60 breaths per minute at birth, and decreases to 30 breaths per minute one year after birth).
<b>Shortness of Breath</b>	Breathing is short and raspy. Child may also find it difficult to breathe in and out properly.
<b>Tiredness</b>	Child appears more tired than usual and has difficulty sleeping.
<b>Fever</b>	Temperature is increased above 38°C.
<b>Mucus</b>	Coughing and vomiting mucus that has collected in the lungs.
<b>Larger Chest</b>	Appearance of chest is large and abnormally inflated.



## What should I do?

<b>Encourage Fluids</b>	Make sure your child is given enough fluids to prevent dehydration.
<b>Nose Drops or Spray</b>	Saline drops can help with congestion and a runny nose.
<b>Fever Management</b>	Use a wet cloth to help lower your child's fever. Give medication as prescribed.
<b>Monitor Temp.</b>	Check your child's temperature regularly to see if there are any changes. If temperature continues to rise contact medical care.
<b>Monitor Breathing</b>	Check your child's ability to breathe. If they experience difficulty breathing with worsening symptoms contact medical care.

## Prevention Methods:

- Wash hands often
- Limit child contact with sick people
- Make sure environment is clean
- Keep away from second hand smoke
- Use tissues once and dispose
- Breast feeding your child improves immunity

