

# CROUP

Croup starts as a regular cold, with runny nose, sore throat, cough and fever. Many viruses can cause this, including RSV and influenza A and B, but the most common cause is parainfluenza virus. Many kids can share the same virus and only a few will come down with croup. Croup causes a deep non-productive cough that sounds like a seal barking. It can take 5 days or more to go away.

Croup is scary when it gets bad because your child has difficulty taking air in. Breathing can be very noisy even while sleeping. A low-grade fever may be present, but high fevers (over 102°) would be unusual and could signify “superinfection” with bacteria. Hemophilus used to be a common bacterial cause but the HIB vaccine protects against this now.

Some kids have something called “spasmodic” croup where allergic irritants cause repeated episodes of croup. But spasmodic croup is frequently irritated by viruses too. Treatment is the same unless the episodes are due to a swallowed object (balloon, toy, food), which obviously needs to be removed.

Frustrating to parents is the fact that in croup, breathing only worsens at night. So when you come to the doctor in the morning, everything looks okay again. The “barky” cough however, confirms the diagnosis.

Early treatment with steroids reduces hospitalizations. Although still widely used, mist tents have not proven to be helpful in croup. The problem is that the air has trouble getting around a swollen trachea and/or vocal folds.



Adding humidity theoretically makes it harder to move the air (heavier, thicker). In fact, recently researchers have treated croup with an oxygen-helium mixture with good success (helium is lighter).

Croup happens suddenly especially in the winter months. When breathing is especially bad, bundling your child up and taking a walk outside usually improves the breathing. Less hardy souls can get some relief in a steamed-up bathroom. The warmth tends to relax the muscles around the airway.

Crying makes breathing more difficult for your child, so distract your child while in the bathroom by calmly reading a book, playing a quiet game, or singing a lullaby. Most children will breathe much more easily within 10 or 15 minutes. Then they can return to their bed. You may want to get the baby monitor back out for the next few nights: all day your child will probably look quite well, but the breathing difficulty usually returns for a few more nights.

Tylenol or Motrin or Advil for pain relief may be helpful. Avoid exposing your child to smoke. Encourage adequate fluid intake. The youngest children may benefit from an upright sleeping position, even a car seat (inside the house).

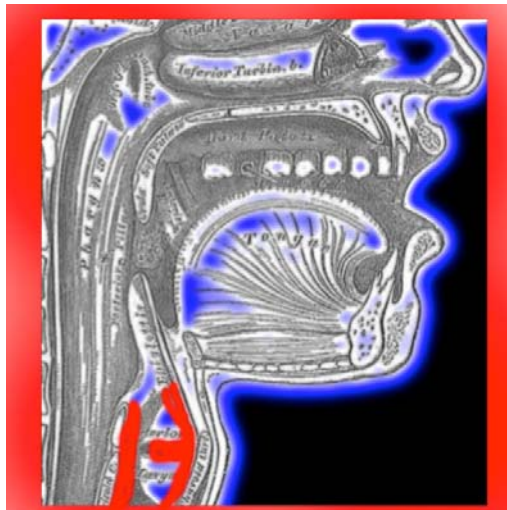


DIAGRAM: swelling in the reddened areas...croup

However, you should seek immediate medical attention if your child:

- Makes noisy, high-pitched breathing sounds when inhaling (stridor)
- Begins drooling or has difficulty swallowing
- Seems agitated or extremely irritable
- Struggles to breathe
- Develops blue or grayish skin around the nose, mouth or fingernails
- Has a fever of 103.5 F (39.7 C) or higher

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