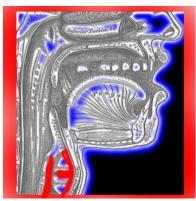
Croup starts as a regular cold, with runny nose, sore throat, cough and fever. Many viruses can cause this, including RSV and influenza A and B, but the most common cause is parainfluenza virus. Many kids can share the same virus and only a



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.

Some kids have something called "spasmodic" croup where allergic irritants cause repeated episodes of croup. But viruses frequently irritate spasmodic croup 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 typically worsens at night. So when you come to the doctor in the morning, everything looks okay, but the next night bad coughing returns.

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. We tend to favor dexamethasone at a dose of 0.6 mg/kg for initial treatment of croup.

Adding humidity (hot or cold) seems to slow the flow of secretions and lead to improved breathing. Thinning the air to make it move more easily with an oxygenhelium mixture has been tried (helium is lighter). I like this croup tent! No pillows for babies though! Just be sure the humidifier cannot cause a burn if it is a warm one. Cool mist humidifiers can be purchased for under \$30, warm mist under \$15.



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 or other possible airborne allergies. Encourage adequate fluid intake. The youngest children may benefit from an upright sleeping position, even a car seat (inside the house).

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 rev 2017 tsg

CARING FAMILY, SC 815-459-2200

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