Connecting the Children's Heart Community

Coughs and colds in children with heart conditions

Most children get coughs and colds, but when you have a heart child it can be an extra worry. Fortunately, most sniffles turn out to be harmless but in a small number of cases heart children will become quite poorly and need medical attention or even a hospital stay. Follow some simple medical guidelines so you can be more aware.

Advice for parents

Prevention

It is virtually impossible to hide yourself away from viruses at this time of year and life has to go on, so a common sense approach is best.

The swine flu guidelines produced by the Department of Health also apply to all common viruses.

If a member of the household is unwell then they can help by:

- Minimising direct contact, e.g. face to face (kissing goodnight for example)
- Use a tissue to sneeze into or when nose blowing, then dispose of it immediately
- Washing their hands after this or before contact with the child

If someone is not living in the house then just ask them to avoid visiting until they are better and avoid places where there are likely to be lots of people with colds.

Symptoms

Typical symptoms of a cold are a runny nose, a temperature, cough and being unsettled. It is very common for a baby or child to be more clingy, and if a child is just starting to wean onto solids this often goes backwards and they revert to just wanting milk.

Contact your GP if your child displays one or more of the following more serious symptoms:

- Being unable to take feeds (sometimes because of breathlessness or a severely blocked nose)
- Working harder with breathing – some people find it hard to know what we mean by this, but when a child has to work harder to breathe they use the muscles in their chest and in their neck. This is seen as sucking in of the skin between or underneath

the ribs (recession) with each breath, head bobbing or sucking in of the area around the top of the chest and the throat (tracheal tug). These are all additive – it is not uncommon for babies to suck in a little under their ribs quite often, but if it looks like they are using more and more muscles to breathe then seek medical attention.
- Wheeziness – this sometimes indicates the virus is affecting the chest and not just a head cold
- Colour change – either becoming pale or becoming noticebly more blue
- Temperature for greater than 48 hours

Warning signs – go to A&E or call an ambulance for these symptoms:

- Working hard with breathing, and grunting – this is making a little grunty noise at the end of each breath, usually when children have reached this stage they look very sick
- If your child is tiring and becoming less responsive
- If your child stops breathing
- Your child looks pale and feels colder than normal
- A rash or purple spots that don't go away when you press it

Remember too to trust your own judgement – you know your child best; if you think something is not right and are concerned, even if you can't put your finger on what exactly it is, then seek medical attention.

Treatment

For most coughs and colds simple treatment with Paracetamol and keeping the feeds going is enough. If fever is a concern then Ibuprofen can be used in those over 6 months of age. Ibuprofen and Paracetamol work very well together…they can either be given at the same time or spaced out and given individually. Sometimes we give Ibuprofen to children under 6 months, but this is unlicensed under this age and I would check with your GP first.

You are advised to follow the instructions on the bottle. However, you must remember that there are lots of different brand names for Paracetamol and Ibuprofen, so if you are giving both then check the labels carefully. An accidental overdose of Paracetamol can be very serious.

Give no more than 4 doses of Paracetamol in a 24 hour period, and 3-4 doses of Ibuprofen. If you are needing to give it for more than 48 hours then please see your GP.

If your child is on Aspirin (as a low single daily dose), then Ibuprofen can still be given, just count the Aspirin as one of the doses.

If your child is on Aspirin more than once a day then it is safest not to give Ibuprofen.

If you require other remedies then please buy from a pharmacy and consult the qualified pharmacist on duty, as they usually give very good advice and can check that they will

not interact with any medicines your child may be taking. It is always advisable with any over the counter preparation to check whether it contains Paracetamol, as this would count towards the total daily dose.

A cough is usually the body's way of clearing extra secretions so is usually a good thing, although it can be disruptive when the cough is tickly or dry. Most over the counter remedies for a cough are not suitable for children under 6 years, so it is best to check with a doctor or a pharmacist before buying them.

Hospital Treatment

If you are unlucky enough to end up in hospital the treatment is usually directed at maintaining normal saturations (normal for your child) and maintaining feeds. Babies may need suctioning or a period of nasogastric feeds while the virus clears.

A sample for respiratory viruses (including RSV and H1N1 influenza) should be taken on admission.

We are not admitting any child with a known respiratory virus to Savannah ward at present, this is to minimise the risk of transmission to other babies and children in the ward. If your child is admitted to the Evelina Children's Hospital then we will be informed and the team for the week will come and see you.

If your child is admitted to another hospital we would like to know, so please do make sure we are informed. We are always there for advice if your doctors need it.

Further Questions

If you have any further questions then please do not hesitate to contact us – as always the best number is the Liaison nurses in 020 7188 4546.

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