

Preschool Wheeze

Information for parents and carers

What is preschool wheeze?

Wheeze is a whistling sound from the chest which is mainly heard on breathing out. You may be told your child has 'preschool wheeze' or 'viral induced wheeze' if they wheeze, struggle to breathe and cough with viral infections. The wheeze may return each time your child has a cold.

The majority of preschool children are well between the viral infections. However a cough can continue for some weeks after the infection. Some children may have symptoms between viral infections, for example when using lots of energy playing or when exposed to allergic triggers (something that irritates the airways).

Does this mean my child has asthma?

Preschool wheeze is very common and most of these children are not wheezing by 6 years of age. Some children will develop asthma, but the majority do not. It can be difficult to predict whether a child with preschool wheeze will be one of the children who have long term symptoms and will be diagnosed as having asthma.

What treatment will my child need?

Usually a reliever such as a 'blue' salbutamol inhaler is given using a 'spacer' (a tube that attaches to the inhaler to help the medicine reach the airways). The medicine in the inhaler relaxes the airways in the chest and makes it easier to breath.

If children are very breathless, a nebuliser is sometimes used to give the medicine as a mist breathed in from a mask or mouthpiece.

Sometimes steroids, such as Dexamethasone and Prednisolone are given by mouth to reduce the swelling of the airway passages. They are not generally suitable for frequent use as they can have side effects if used often.

Most children with preschool wheeze will not need a regular 'preventer' inhaler. The few who get very frequent episodes or severe wheeze will have a trial of these inhalers (usually a 'brown' beclomethasone steroid inhaler). Granule medication, such as montelukast, may be given.

Antibiotics are ineffective against viruses so are very rarely recommended in preschool wheeze. A viral illness will get better by itself once it has run its course.



What happens if my child is admitted to hospital?

Children are often observed on the children's assessment unit to see how quickly their wheeze is improving, many will be able to go home after a few hours. They may need to stay in hospital if they are very wheezy or if they need oxygen.

The nurses will make regular observations of your child's temperature, pulse, breathing and oxygen levels ('saturations').

Your child will be given extra oxygen using a mask or fine tubes into the nose if their oxygen saturations are low.

Your child will be given inhalers or a nebuliser to help their breathing and sometimes other medicines by mouth or into a drip.

Smoking

Children with wheeze are sensitive to tobacco smoke. Exposure to this makes it much more likely they will have a further wheezing attack or develop asthma. Help to give up smoking can be obtained from your GP, the NHS Quit Smoking website and the National Smokefree Helpline: 0300 123 1044.



https://www.nhs.uk/better-health/guit-smoking/

How to use an inhaler with a spacer with a mask

- 1. Shake the inhaler well and attach it onto the end of the spacer.
- 2. Apply mask gently to the face ensuring a good seal is formed over the nose and mouth.
- 3. Squirt one puff of the inhaler into the spacer.
- 4. Hold spacer in this position for 5-6 breaths.
- 5. Rest for 30 seconds then repeat all steps if further puffs are needed.

Wash out mouth or clean teeth if a steroid (preventer) inhaler has been used.

When the inhaler needs replacing, take the old inhaler to the pharmacy for safe disposal.

There are different makes of spacer. In the RUH we use AeroChamber spacers shown in the pictures here:





Images of AeroChamber Spacers provided courtesy of Trudell Medical International

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(0-18 months)





A video on using spacers for young children can be found on the **Asthma and Lung UK** website:



https://www.asthmaandlung.org.uk/living-with/inhaler-videos/spacer-with-mask

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If you would like this leaflet in email form, large print, braille or another language, please contact the Patient Support and Complaints team on 01225 825656.

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