

Bronchiolitis (Child)

Bronchiolitis

Patient Information

Child Health Department

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What is Bronchiolitis?

Bronchiolitis is a common chest infection caused by a virus called RSV (Respiratory Syncytial Virus). It is a virus in the lungs that causes children to have breathing difficulties. Although RSV occurs throughout the year, it is most common during the winter months. It usually occurs in children under 18 months but can occur in older children as well.

Children with Bronchiolitis need to rest and have small feeds more often so that they do not become too tired when feeding.

RSV can be spread to younger children and infants by close contact with older family members who may have only mild cold symptoms. Careful disposal of tissues and objects that may contain infectious secretions and regular hand washing reduces the spread of infection.

What are the symptoms?

The first symptoms that your child may have are the same as a common cold:

- Slight fever.
- Snuffy/runny nose.
- Sneezing.
- Cough.

These can be followed after 2 to 3 days by increasing breathing difficulties such as:

- Very fast breathing.
- Noisy breathing (wheeziness).
- Drawing in of the chest wall with each breath.
- Seem tired and sleep more.
- Not be interested in feeding, or be too breathless to feed.

What tests can be done?

Some secretions will be taken from your child's nose and tested on the ward for the RSV. This sample will also be sent to the laboratory for further testing. This sample will be tested

for viruses and bacteria in order to help diagnose your child's illness. You will be informed of the result.

What is the treatment?

There is no medicine that is effective for treating Bronchiolitis. However, in hospital, we can make your child more comfortable and monitor your child's condition very carefully.

- If your child is distressed and having trouble breathing, we can give oxygen to help make breathing easier for them.
- We will continue to offer your child feeds in smaller amounts, at more frequent intervals, this may be easier to tolerate.
- If your child is unable to take bottle or breast feeds, it may be necessary to put the feed into their stomach using a tube down the nose (nasogastric tube).
- If feeding is causing problems, occasionally we will give fluid through a vein (intravenous infusion).
- Very occasionally, we have to assist your child's breathing.

How long will the illness last?

Children are usually sick for three to five days and then recover over the next seven to 10 days. The cough may continue for four weeks. When your child is feeding and is able to breathe more easily in air without needing oxygen, we will discuss going home with you.

When you are home

- Avoid smoky environments as this will make your child's breathing worse. Always try not to smoke in the home or around your child.
- Continue to give your child smaller amounts of fluid more often; or more frequent breast feeds. This way your child will not get too tired when feeding.
- Encourage your child to rest.

Call your GP if your child's:

- Cough is getting worse.
- Is taking less than half of their normal fluid intake or refusing drinks.

- Appears very tired or more sleepy than usual.

Bring your child to hospital if your child:

- Has difficulty in breathing (very fast or not regular breaths).
- Cannot feed properly because of coughing and wheezing.
- Changes colour in the face when coughing.
- Has skin that is pale and sweaty.

Call an ambulance if your child:

- Has great difficulty in breathing.
- Becomes floppy, agitated or collapses.
- Becomes blue or very pale in the lips or face.

Contact Information

Please feel free to ask if you have any questions or queries which we have not covered in this leaflet. The staff will be pleased to answer your questions as clearly and honestly as they can.

Rainbow Ward, telephone number: 01942 778762 or 778763. Ward open 24 hours.

Please note that we can only give specific advice where we have recently been involved in the care of a child.



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