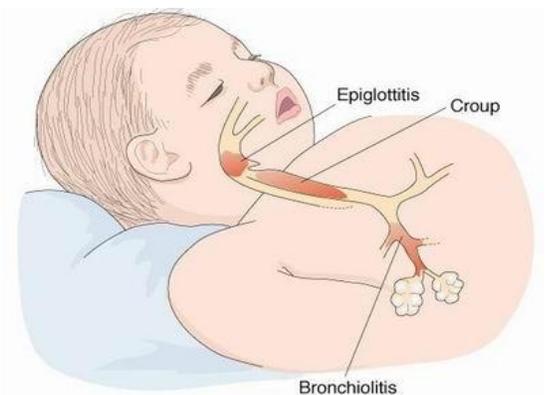


WEST AFRICAN RESCUE ASSOCIATION

CROUP: WHAT YOU NEED TO KNOW

THE DISEASE

Croup is a common respiratory condition characterized by an inflammation of the upper airways that often occurs in infants and children. Croup is due to a swelling and narrowing of the larynx and trachea that result in a harsh, “barking” cough.



CAUSES OF CROUP

- Viral infection (most common)
- Bacterial infection
- Allergies
- Breathing in something that irritates your airway
- Acid reflux

The most frequent cause of croup is the **parainfluenza virus**. Other viral infections that can cause croup include adenovirus, influenza A and B, measles, and respiratory syncytial virus (RSV). A child may contract the virus by breathing in infected air or by touching contaminated toys or surfaces.

In severe cases of croup, there may also be a **bacterial infection** of the upper airway. This condition is called bacterial tracheitis and requires a hospital stay and antibiotics through a vein.

RISK FACTORS

Croup tends to appear more commonly in children between 3 months and 5 years old, but it can happen at any age. Symptoms are most common and most severe in children between 6 months and 3 years old.

In Ghana, Croup is far more common in the Harmattan season due to the dryness in the air and the larger amount of dust particles around, but can also occur at other times of the year as well.

SYMPTOMS

Croup features a **cough** that sounds like a seal barking. Some children can have what appears to be a **mild cold** with a **fever** for several days before the “barking” cough becomes evident. As the cough gets more frequent, the child may have a **stridor** (a harsh, crowing noise made during inspiration). In some cases the croup attack can be of a very sudden onset with no other prior symptoms. It is often associated with a very high fever.

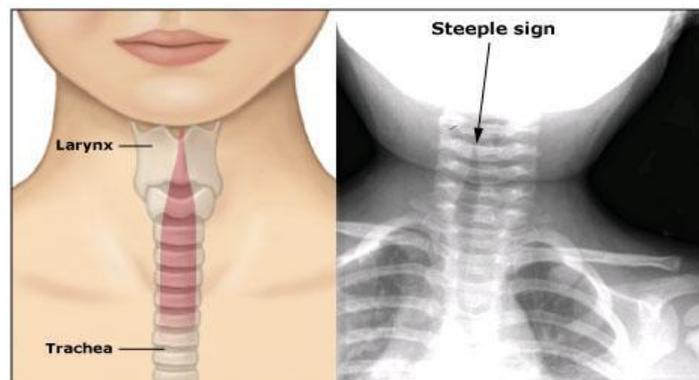
Croup is typically worse at night. It often lasts 5 or 6 nights, but the first night or two are usually the most severe. Rarely, croup can last for weeks. Croup that lasts longer than a week or recurs frequently should be discussed with your doctor to determine the cause.

SIGNS AND DIAGNOSIS

Children with croup are usually diagnosed based on the parent's description of the symptoms and a physical examination of the child. Sometimes a doctor will even identify croup by listening to the child coughing and breathing.

- A physical examination may show chest retractions with breathing.
- Listening to the chest through a stethoscope may reveal prolonged inspiration or expiration, wheezing, and decreased breath sounds.
- An examination of the throat may reveal a red epiglottis.

On some occasions, the doctor may ask for an x-ray. An x-ray in a child with croup will present a "steeple sign", showing the top of the airway narrowing to a point. In some cases blood is drawn for laboratory investigations to indicate if the cause is viral or bacterial to identify the most appropriate treatment.



TREATMENT

Most of croup cases can be treated at home with fluids and breathing moist air. You might try bringing the child into a steamy bathroom. If you have a cool air vaporizer, set it up in the child's bedroom and use it for the next few nights.

Tylenol can make the child more comfortable and lower a fever, lessening his or her breathing needs.

Avoid cough medicines unless you discuss them with your doctor first.

In more advanced cases, a doctor may prescribe corticosteroids and aerosol treatments to relax swollen airways. Severe croup cases may require hospitalization where humidified oxygen can be administered.

CALL YOUR DOCTOR IF YOUR CHILD:

- has bluish lips or skin color
- is having trouble swallowing or breathing
- has stridor (strange noises when breathing in)
- has agitation or extreme irritability
- has retractions (tugging-in between the ribs when breathing in)
- is dehydrated
- is not responding to home treatment

PREVENTION

To prevent croup, it is advised to wash hands frequently and avoid contacting people who have respiratory infections.

The diphtheria, Haemophilus influenzae, and measles vaccines protect children from some of the most dangerous forms of croup.