

Paediatric Pearls

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Previous editions are all available at www.paediatricpearls.co.uk

Bronchiolitis part 2: **Bronchiolitis in children.** NICE guidelines [\[NG9\]](#) Published date: June 2015

The bronchiolitis season is upon us again here in the UK. I have summarised *Assessment and diagnosis, When to refer/admit* in Part 1 ([August newsletter](#)). Part 2 of this topic on *Management and Discharge* is below.

Management:

- Chest physio only indicated in children with comorbidities who can't clear their secretions
- Following treatments not indicated: Antibiotics, hypertonic saline, nebulised adrenaline, salbutamol, montelukast, ipratropium bromide, systemic or inhaled steroids
- O₂ is indicated if O₂ sats persistently below 92%
- CPAP is worth considering in very unwell children
- Upper airway suctioning should be done in babies presenting with apnoea (even if no obvious secretions)
- Routine blood gas not indicated unless in extremis
- Give oro- or naso-gastric tube fluids if child can not take enough fluid by mouth and iv fluids if not tolerating tube feeds

Discharge

- Discharge when clinically stable, able to take adequate oral feeds, O₂ sats > 92% in air for at least 4 hours to include a period of sleep
- Take skill of carer into account and distance from healthcare facility when making plans to discharge
- Advise no smoking and safety net adequately. **Red flags:** Worsening work of breathing (grunting, marked chest recession), no wet nappy for 12 hours, apnoea or cyanosis, exhaustion

NICE parent information leaflet: <http://www.nice.org.uk/guidance/ng9/resources/bronchiolitis-in-children-80663513029>

[Click here](#) for video clips of bronchiolitic cough and subcostal recession

Mr Sunil Sharma's **ENT** spot:

Paediatric quinsy (*peritonsillar abscess*)

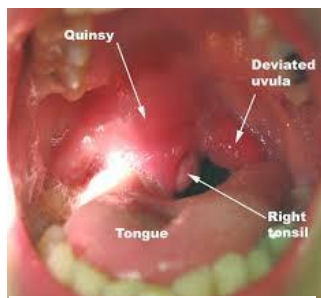
☞ Rare in children but think of it in the immunocompromised population.

☞ Signs and symptoms:

- Sore throat
- Pyrexia
- Odynophagia
- Unilateral otalgia
- Trismus
- Change in voice

(muffled voice, thickened speech, 'hot potato' voice)

☞ Unilateral swelling in peritonsillar region (soft palate just above tonsil) and deviated uvula – differs from unilateral tonsillar enlargement (see picture)



Picture taken from <http://tonsillitisunderstood.blogspot.co.uk/p/complications-of-tonsillitis.html>

Management:

☞ Refer urgently to ENT (will need needle aspiration +/- incision and drainage of abscess - may be necessary under general anaesthetic depending on age - and IV antibiotics)

☞ Most patients go on to have tonsillectomy once infection settled down (interval tonsillectomy)

☞ No evidence of any difference in complications between 'hot' tonsillectomy (performed at the time of surgical drainage) and interval tonsillectomy – excellent review paper on the topic - Powell J, Wilson JA. An evidence-based review of peritonsillar abscess. *Clin Otolaryngol* 2012 Apr;37(2):136-45.

Recommended **self-help books** by clinical psychologist Dawn Huebner for children aged around 7 – 11 and their parents:

- ☞ *What to Do When You Worry Too Much: A Kid's Guide to Overcoming Anxiety* ([Amazon link here](#))
- ☞ *What to Do When Your Temper Flares: A Kid's Guide to Overcoming Problems with Anger*
- ☞ *What to do when you grumble too much: a Kid's Guide to Overcoming Negativity*

My family has used the one on anxiety (known as "that tomato book" in our house because of the analogy of worries being like well-tended tomatoes) and I now recommend it to patients and friends alike. Might get the "grumbling" one next.....

Welcome to our new trainees and to everyone starting out on their ED or GP training. Please do keep up to date with all things paediatric by reading the monthly Paediatric Pearls newsletters available on the site and searchable should you wish to look up a topic. Also take a look at the collection of [primary care guidelines](#) from around the UK which may help to inform your practice. Have a look at the [September 2013](#) newsletter for a list of useful links to articles on the site to get you started on common paediatric problems. Do make contact if you want to write for www.paediatricpearls.co.uk or if there is anything you would like me to cover in forthcoming issues.



[The Black Dot campaign](#) seeks to give victims of domestic violence (DV) a way of silently communicating this to others who may be able to help them. The Independent Domestic Violence Advisors (IDVA) is a government initiative introduced to reduce the number of Domestic Related Homicides. There is an IDVA based in Whipps Cross' ED who you can go to for advice or refer consenting adults to. All boroughs have DV resources on their websites. [Click here](#) for Waltham Forest's.

DV definition:

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse (emotional, physical, sexual, psychological or financial) between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. **Children are at risk of harm where there is DV in the home.**

Redbridge's new safeguarding website: www.redbridgescbs.org.uk