

# Cough and/or breathing problems

The child with breathing problems may have noisy breathing, wheeze, grunting, snoring or stridor (noisy, high-pitched breathing). If child not breathing 24.

**Give urgent attention to the child with:**

- Baby < 2 months old
- History of apnoea (episodes of no breathing > 10 seconds)
- Unable to drink/feed
- Tires/sweats during feeds
- Lower chest indrawing

**Give urgent attention to the child with:**

- Nasal flaring
- Grunting
- Stridor
- Blue lips/tongue
- Sats ≤ 92%
- Restless or irritable
- Lethargy or decreased level of consciousness (2135)
- Sudden difficulty breathing and any of: generalised itchy rash, face/tongue swelling, fainting/dizziness/collapse, abdominal pain/vomiting or exposure to likely allergen<sup>1</sup>, check for **anaphylaxis** 2112.

**Manage and refer urgently:**

- Give oxygen 2L/minute via nasal prongs. If < 1 year old with blocked nose, instil **sodium chloride 0.9%** solution 1 drop into each nostril and suction the nose.
- If wheeze → 51 or if known heart problem → 117.
- Check fingerprick glucose: if < 3 or > 11 mmol/L 231.
- Give **ceftriaxone** 80mg/kg (up to 1.5g) IV/IM (2129:7). If < 1 year old and HIV positive or unknown, also give single dose of **co-trimoxazole** (2130:13).
- If stridor, encourage carer to keep child calm.
- Give **prednisone** 2mg/kg (up to 40mg). Give **epinephrine**<sup>3</sup> (1:1000) 1mL in 1mL **sodium chloride 0.9%** via nebuliser (oxygen 8L/minutes) every 15 minutes until stridor disappears.

**Approach to the child with cough and/or breathing problems not needing urgent attention:**

- If smoking in the house, alert to risks and encourage smoker to quit 2PACK Adult helpline.
- If recent episode of choking, **Inhaled foreign body** likely. Refer same day.
- If current wheeze → 51.
- If breathless on exertion, discuss/refer same day.
- If coughing attacks with 'whoop' on breathing in, **pertussis** likely: give **azithromycin** 10mg/kg (up to 500mg) once daily for 5 days (2129:6), notify and isolate for 2 days.
- Ask about duration and number of episodes.

| 1 episode of cough and/or breathing problems lasting < 2 weeks<br>Is respiratory rate increased (2135)?  |   | Cough and/or breathing problems ≥ 2 weeks or repeated episodes<br>• If HIV status unknown, test for HIV 2105.<br>• Exclude TB 2100. While excluding TB consider other causes:   |  |  |
|--|---|---|--|--|
| Yes  | No  |   |  |  |
| <p><b>Pneumonia</b> likely</p> <ul style="list-style-type: none"> <li>• Give <b>amoxicillin</b><sup>4</sup> 45mg/kg/dose (up to 1g) 12 hourly for 5 days (2128:3).</li> <li>• If &gt; 2 episodes/year needing hospital, do HIV test if status unknown, and refer/discuss non-urgently.</li> <li>• Review after 7 days: if respiratory rate still increased (2135), refer.</li> </ul> | <p style="text-align: center;">Runny/blocked nose</p> <p style="text-align: center;"><b>Common cold</b> likely</p> <ul style="list-style-type: none"> <li>• Check ears 245, throat 247, nose 246.</li> <li>• Reassure carer antibiotics not needed.</li> <li>• Advise to drink warm liquids to relieve symptoms.</li> </ul> | <p style="text-align: center;">Barking cough, may be hoarse</p> <p style="text-align: center;"><b>Viral croup</b> likely</p> <ul style="list-style-type: none"> <li>• Give single dose <b>prednisone</b> 2mg/kg.</li> <li>• Advise to return immediately if worse or stridor develops.</li> </ul> | <p style="text-align: center;">If recent common cold<br/>• If wet cough &gt; 4 weeks, refer.<br/>• If dry cough, <b>post-infectious cough</b> likely: should resolve by 8 weeks.</p> | <p style="text-align: center;">If blocked nose or noisy breathing worse at night and/or snoring 246.</p> <p style="text-align: center;">If known with long term health condition:</p> <ul style="list-style-type: none"> <li>• Asthma 2114.</li> <li>• Bronchiectasis 2116.</li> <li>• Heart problem 2117.</li> <li>• If life-limiting illness, also give palliative care 2123.</li> </ul> |
| If repeated episodes of cough, wheeze, tight chest or difficulty breathing 253.  |   |   |  |  |

**Refer if cause uncertain or not growing well, chest deformity, cough > 8 weeks, coughs/chokes with feeds or cough worse despite treatment.**

<sup>1</sup>Allergen can be an insect bite, ingesting medicine or new food in the last hour. <sup>2</sup>Epinephrine is also known as adrenaline. <sup>3</sup>If penicillin allergy (history of anaphylaxis, urticaria or angioedema), give **azithromycin** 10mg/kg (up to 500mg) once daily for 3 days instead (2129:6).