

Indian Academy of Pediatrics (IAP)



GUIDELINES FOR PARENTS

Care of a Child with Recurrent Cough

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10 FAQs on CARE OF A CHILD WITH RECURRENT COUGH

1. My baby was born prematurely. She weighed 1.8 kg at birth. Now she is 5 months old. She gets cough very often. What tests I need to get done?
2. My 1-year-old son gets cough very often. What could be the reason for that?
3. My 6-month-old baby coughs and vomits quite often. What should I do?
4. I have 9-month-old baby. She is not gaining weight. She coughs often and does not feed well. What could be wrong with my baby?
5. My 6-year-old daughter snores very loudly during sleep. Sometimes she coughs also. Is it serious?
6. I have a 5-year-old son. He has bouts of cough at night and gets up from sleep. This is happening since last 6 months. What could be wrong with him?
7. My 6-year-old son is not growing well as compared to his friends of the same age group and has pneumonia four to five times till now. What could be wrong with him?
8. My son is 3-year-old now. He gets fever, cold, and cough very often. What could be wrong with him?
9. My 15-year-old son has developed this cough since last almost 3 months. He coughs very often during the day, but has sound sleep at night. I am tired of his cough. How can I help him?
10. My 5-year-old daughter gets cold and cough very often. What should I give to boost her immunity?

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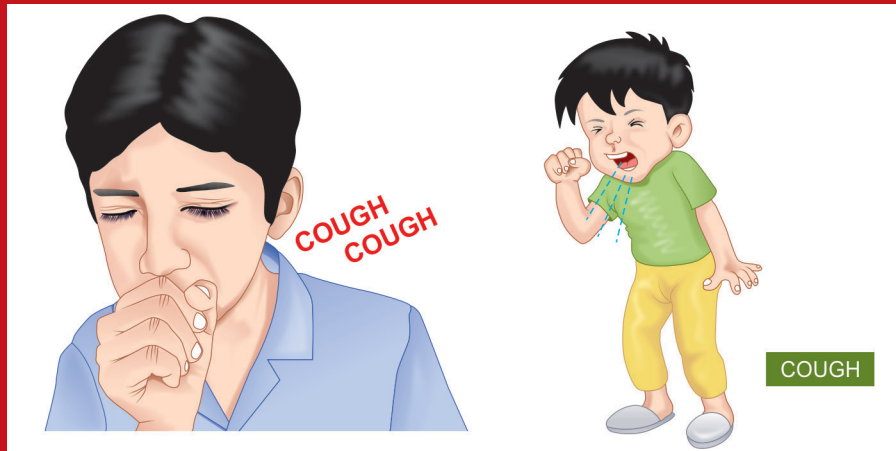
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Care of a Child with Recurrent Cough



Introduction

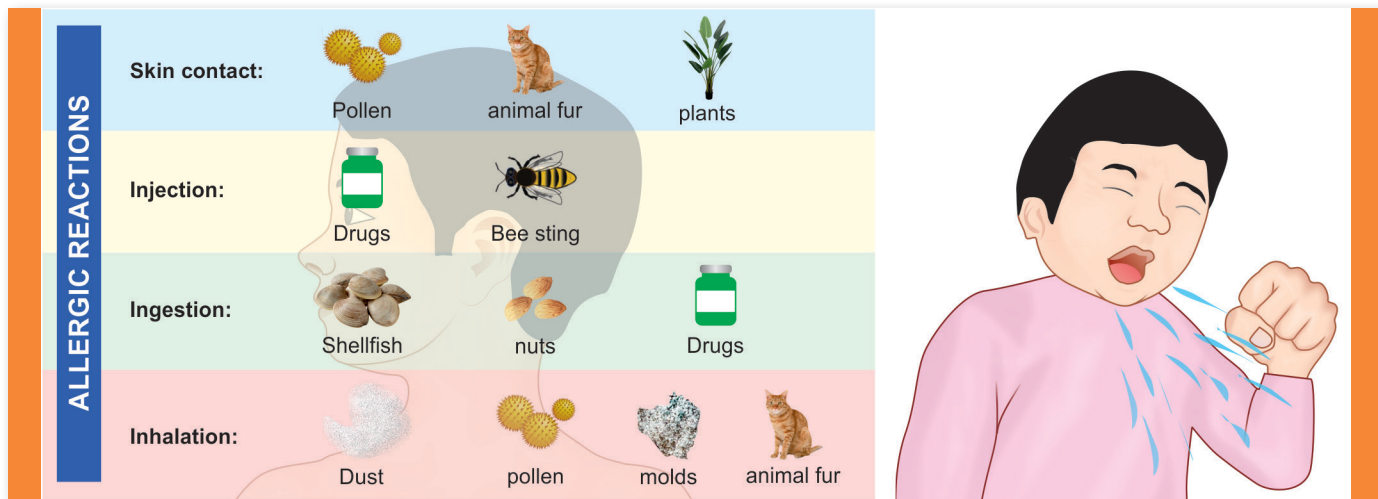
Cough is a reflex response of lower respiratory tract caused by the stimulation of cough receptors present in the inner wall of the windpipe. Cough is a type of protective reflex that helps in clearing the windpipe and protects it from harmful bugs, dust particles, secretions, and irritants. Cough receptors are present in the throat, paranasal sinuses, external ear canal, and stomach. Cough can be caused by some heart problems also. It can be categorized based on duration (acute, chronic, persistent, and recurrent) and quality (dry or wet and brassy).

Cough is a symptom of various underlying illness ranging from mild self-limiting illnesses to severe life-threatening disorders. It can cause significant anxiety in parents, and therefore needs to be addressed promptly. The source may also need to be sought beyond lungs and respiratory tract.

Q1

My baby was born prematurely. She weighed 1.8 kg at birth. Now she is 5 months old. She gets cough very often. What tests I need to get done?

In children born prematurely, these kinds of symptoms are seen often, associated with a wheezing sound and coughing. These babies have narrow windpipe resulting in decreased passage of the air through it, and hence the sounds are produced while breathing, at times accompanied with cough. Usually these infants do better by themselves as they grow. It is advised not to give medications for cough in these babies. But in instances where these infants find it difficult to breathe and/or feed, it is always advisable to consult your pediatrician for medication, if required.



Q2

My 1-year-old son gets cough very often. What could be the reason for that?

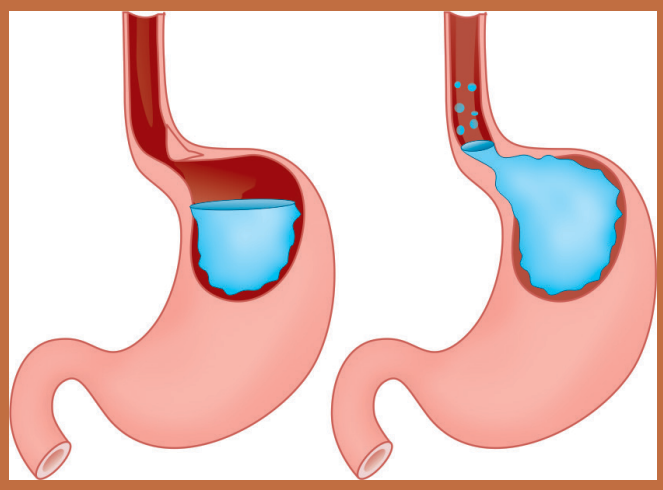
Some children are inherently more susceptible to common environmental allergens such as certain respiratory viruses, tobacco smoke, air pollutants, food items, animal dander, molds, perfumes, etc. Repeated exposure to these allergens irritates their airway which may present as cough. Sometimes viral infection triggers the *hyperactiveness* of airway which might present with fever as well. The cough may last for many days. It is important for these children that the parents should identify and avoid exposure to allergens. Allergens can be identified by parents' observation or by allergy testing. The condition is likely to recur on exposure to the trigger and might damage the windpipe upon repeated exposure, therefore needs to be addressed by your pediatrician for timely and effective intervention.

Medicines that suppress cough are strictly contraindicated in these children. These children may need some long-term treatment.

Q3

My 6-month-old baby coughs and vomits quite often. What should I do?

In young infants with frequent episodes of vomiting and cough, there is a possibility that the baby has significant reflux. In the human body, in between the food pipe and the stomach, there exists a valve and whenever the stomach is full, this valve closes preventing the entry of the contents of the stomach into the food pipe. In infants when the valve is not fully developed, there is a chance of the milk coming up into the food pipe from the stomach. Even if one or two droplets of the milk enter the windpipe, the



child coughs as a protective mechanism to expel the milk out. In these babies, a simple intervention like giving a propped-up position and thickening the feeds can help to avoid these episodes. For persistent episodes, it is advisable to consult a pediatrician. These children may need medicines to treat reflux.

In older babies, recurrent bouts of cough often followed by vomiting should alert to the possibility of foreign body aspiration into the airway.

Q4

I have 9-month-old baby. She is not gaining weight. She coughs often and does not feed well. What could be wrong with my baby?

The important observation here is that the baby is not gaining weight and is unable to feed well. There are certain heart conditions wherein a hole in the heart causes excessive blood flow from heart to the lungs and flood them up with this extra blood. This extra load on lungs may cause frequent-cough. Activity like feeding needs coordination of swallowing and breathing at the same time. In children with heart diseases, as the lungs are already overworked, they are unable to feed efficiently. Due to constant difficulty in feeding, excessive cough and energy consumption in lungs, such children do not grow at par with the children of same age and gender.

Many times, these conditions are not life-threatening and can be corrected medically, surgically or with a combination of both the modalities.

The child needs to be seen by a pediatric cardiologist. He may advice to do two-dimensional (2D) echocardiography to diagnose the defect. Timely intervention will help the child to grow and develop to maximum potential and will also help relieving the cough, feeding, and breathing problems.

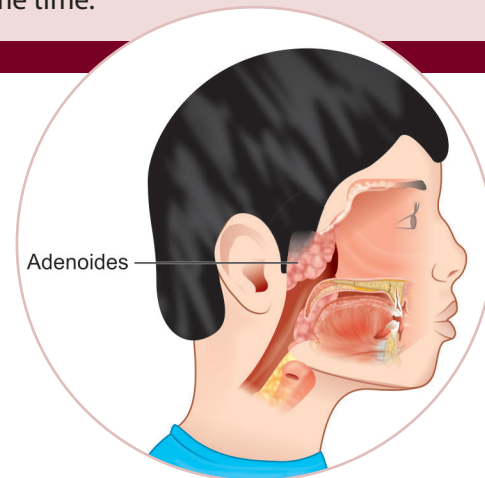
Q5

My 6-year-old daughter snores very loudly during sleep. Sometimes she coughs also. Is it serious?

Snoring is a sound produced by obstruction of the upper part of the windpipe. Any child who snores has some obstruction in upper part of the windpipe, mainly caused by enlarged adenoids.

Adenoids are the tissues located at the back of the throat, in the passage connecting nose to the throat. They help in protecting the children from the bacteria and viruses entering the body from the nose. Any allergies or frequent infections cause the adenoids to enlarge. When enlarged to the extent blocking the windpipe, the child develops stuffed nose, snoring, difficulty in sleeping, frequent cold and cough, and frequent sore throat.

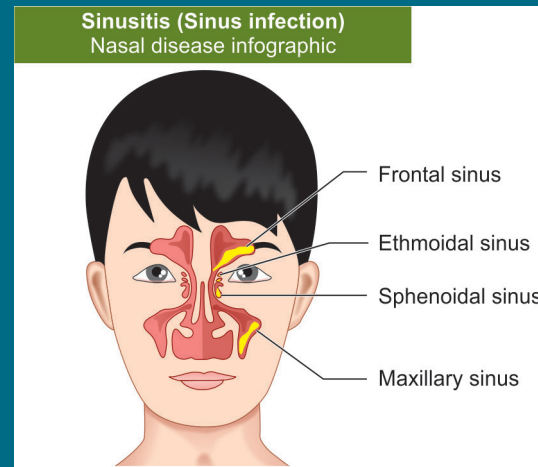
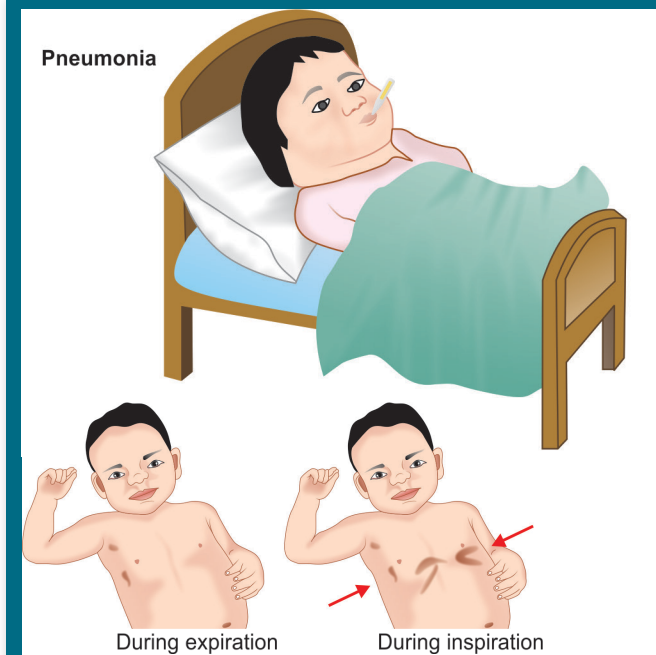
Usually, the adenoids return to their previous size once the infection is treated. For the above symptoms, it is advised to consult your pediatrician for treatment. It might need investigation like an X-ray of the neck where the obstruction in the windpipe due to enlarged gland can be seen. Many of these children may need anti-allergic medicine for some time.



Q6

I have a 5-year-old son. He has bouts of cough at night and gets up from sleep. This is happening since last 6 months. What could be wrong with him?

Normally, the secretions from nose and sinuses are drained in throat without conscious efforts. The production of mucus may exceed its drainage in several chronic conditions such as inflammation of inner lining of nostrils (rhinitis), inflammation of sinuses (sinusitis), growth (such as polyps) in the nose, or enlarged adenoids. Most often, this is caused by allergy especially in the night (lying-down position); giving rise to bouts of cough. These excess secretions from nose and sinuses gravitate to the throat. You need to consult your pediatrician to address the underlying condition which is causing the excessive mucus production and treat the same. The condition, by itself, may not be grave but is bothersome and hampers the sleep. This may also affect your child's growth and performance in school. These children need long-term anti-allergic medicines. Older children may complain of headache.



Q7

My 6-year-old son is not growing well as compared to his friends of the same age group and has pneumonia four to five times till now. What could be wrong with him?

Poor growth of your child and its association with pneumonia four to five times indicate the presence of an underlying disorder. It appears that the immunity of the child is not strong enough to fight the harmful organisms present in nature, and therefore your son falls sick repeatedly. Recurrent pneumonia indicates some serious compromise of immunity. These children need management and constant follow-up with the help of a pediatrician.

Q8

My son is 3-year-old now. He gets fever, cold, and cough very often. What could be wrong with him?

It is important to check growth of children who are getting recurrent fever, cold, and cough. If they are growing well it is unlikely that they have any serious health problem. Many children get recurrent viral upper respiratory infections. These episodes need symptomatic treatment, whenever symptoms are bothering the child. The child needs to be given nutritious diet so as to provide all the vitamins and micronutrients needed for building immunity and sustaining cell growth. An adequate and sensible exposure to sunlight is also advised. Please read the Parental Guidelines on Nutrition, as per the age of your child, to know what and how should you feed him/her.

Q9

My 15-year-old son has developed this cough since last almost 3 months. He coughs very often during the day, but has sound sleep at night. I am tired of his cough. How can I help him?

This kind of cough which is not associated with difficulty in breathing or wheezing, which occurs often in the day and absent during sleep could be a *habit cough*. It is a repetitive cough that happens without any underlying disease. It may follow a viral disease, but persists beyond the illness. The cough is loud and barking kind. The coughing irritates the windpipe and that leads to even more coughing. It is often related to stress and anxiety. However, before labeling it as habit cough, it is advisable to visit your pediatrician to rule out other causes of this type of cough. Children who have habit cough may need behavioral therapy and counseling.

Q10

My 5-year-old daughter gets cold and cough very often. What should I give to boost her immunity?

Immunity of a person is an internal trait that cannot (and should not) be reliably changed by any immunity booster in normal situations. Child needs to consume healthy diet and maintain normal nutritional status to allow immunity mechanisms of his/her body to act optimally and respond to infections.



*Do not worry about the cough. Find the cause and treat that.
Remember, children can mock the cough.*

Do's and Dont's in Cough

- Be observant regarding the pattern of cough and what is triggering the cough.
- Do not treat recurrent or persistent cough, cold, or fever at home. Do consult a pediatrician for advice and treatment of the underlying cause.
- Do not feed the baby while sleeping or lying flat. Always give a propped-up position.
- Do not lift the baby when they cough and vomit. Turn them on to their left side.
- Always adhere to the treatment prescribed by the pediatrician.
- Use cough syrup judiciously.
- Recurrent cough is less like to be because of bacterial infection.
- Antibiotic is not an answer to every cough.