



Common winter illnesses



What are common winter illnesses?

In this pamphlet:

- What are the most common illnesses?
- How to reduce the risk of infection
- The signs and symptoms to look out for
- Where to get help and advice

Who can help?

Contact your local health line, doctor, nurse or pharmacist for advice.



All children experience winter illnesses, but babies born premature can be at a higher risk of complications. This pamphlet provides you with information on the most common winter illnesses and offers suggestions on how to protect your family.

Things you can do

- Regularly wash your hands, and encourage others to do the same
- Always make sure your child's immunizations are up-to-date
- Clean toys, highchairs and work surfaces as regularly as possible
- Use disposable tissues to avoid spreading infection

“When my premature twins came home after months in the hospital, I was on guard. We were moving into the fall season and I was concerned about my babies catching common colds or possibly something more. I knew the reality that premature infants are often more susceptible to catching illnesses and chose to put safeguards in place. We ensured regular hand washing by our toddler, family members and household visitors. We set up hand sanitizer pumps in several spots in the home as a gentle reminder to keep hands clean while in our home. I felt more confident taking these simple actions.”

MOTHER OF THREE PREMATURE CHILDREN, CAMDEN, CAEL AND CIAN

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Introduction

Coughs, colds and stuffy noses affect us throughout the year. It is normal for babies and children to catch more colds than adults. Adults become immune to infections either by catching them earlier in their lives, or by being immunized. Infants and children get more colds, as it takes time for them to develop this immunity. Babies are provided with some protection in their early months from immunity passed through the placenta from their mother in the last trimester of pregnancy. However, babies born prematurely miss out on this passive immune protection.

For most people, having a cold or cough means a miserable few days before they start to feel better. The winter months can be challenging for the very young, and in particular, for children who were born premature, especially if they have lung problems or a congenital heart condition. From November to April, the winter months can be challenging as babies are at a greater risk of becoming seriously ill following an infection from a common winter illness.

This pamphlet aims to provide some information on the more common infections during the winter months. We have outlined what symptoms to look for, treatments available and tips on how to best prevent your baby from becoming sick.

One of the very best ways to avoid infection is to be prepared. Talk to your health care provider so that you are aware of the potential risks, prevention tactics and know what to expect.

Coughs, cold and sniffles

Babies and children normally catch several colds each year. Catching a cold can be a miserable time for them, and you, as family members.

Colds are nose, throat and sinus (upper respiratory tract) infections caused by one of many different viruses. A virus is a germ that makes you sick. A cold is most commonly spread through droplets produced with coughs and sneezes and is easily transmitted through hand-to-hand contact.

Reducing the risk of infection

- Wash your hands frequently
- Use disposable tissues
- Regularly clean toys, highchairs and work surfaces
- Avoid contact with others who are sick

What are the symptoms?

The major symptoms of a cold will develop slowly and can include a runny or blocked nose, a cough, sneezing, red eyes and possibly a mild fever, loss of appetite and general crankiness. These symptoms can last a few days, a week, or even longer with very young babies.

Colds are caused by a virus and cannot be treated with antibiotics. Over-the-counter cough and cold medicines are not recommended for children under the age of six. Health care professionals advise that most of the cold remedies you can buy at the pharmacy don't work and can be potentially harmful for young children.

There are other ways to help with stuffy noses. It is important to keep up your baby's fluid intake. Offer your baby plenty of breast milk or formula. Babies over four months of age can be offered water.



Do not use pillows, loose towels or blankets in your baby's bed, as these pose suffocation risks.

If babies are really congested, they may find it hard to eat. You can try softening the mucus in your baby's nose with saline, and then use a nasal aspirator (this is a simple suction device that you can buy at most pharmacies) to remove it. To help with sleep, put a humidifier in the baby's room. This moistens the air, and can reduce congestion.

If your baby is not peeing as much as usual, has sunken eyes or a sunken soft spot on the top of his or her head, this could be a sign of dehydration. Please contact your doctor's office immediately.

A fever is not dangerous to babies or children but it often does make them feel miserable. To bring down a fever, acetaminophen medication can be given, or ibuprofen liquid if your baby is over six months old. Be sure to check the label of the medication carefully or ask your pharmacist for the right dose for your baby's weight and age.

Watching your little one battle a cold for the first time will be as miserable for you as it is for them. With experience, you will become confident in comforting and treating your child.

When to call your health care provider:

- If your baby's temperature rises suddenly or the fever continues for more than two days. A fever is a temperature of 38° C or higher.
- If your baby develops difficulties breathing or becomes wheezy
- If a cough lasts for more than a week
- If you notice a rash on your baby's body

Bronchiolitis

Bronchiolitis is the inflammation of the small airways in the lungs that leads to a build up of mucus, causing breathing problems. It is a common illness that affects babies and young children. A Respiratory Syncytial Virus (RSV) infection or other cold viruses often cause bronchiolitis. (See page 9 for more on RSV).

Babies may need extra care to treat bronchiolitis if they were born early, or have lung or heart problems. About one in three children will have bronchiolitis in the first two years of their life. It is the most common cause for hospitalization for children in their first year of life.

What are the symptoms?

The symptoms of bronchiolitis are similar to those of a cold, plus rapid shallow breathing, a cough that won't go away, wheezing and fever. Bronchiolitis lasts from a couple of days to a week, or even two weeks with a lingering cough.

How you can help

Offer babies extra fluids, and keep them cool and not overdressed if they get a fever. Acetaminophen medication can be given, or ibuprofen liquid if your baby is over six months old. Be sure to check the label of the medication carefully and ask your pharmacist for the right dose for your baby's weight and age.

Remember FACT

If your baby shows all of these symptoms, see a health care professional.

- **F**ast breathing: shallow, quick breaths, not taking in much air
- **A**ppetite: not feeding much
- **C**ough: distinctive, rasping cough
- **T**emperature: high temperature along with cold-like symptoms of a runny nose.

Respiratory Syncytial Virus (RSV)

Respiratory syncytial virus (RSV) is a very common virus that causes cold-like symptoms. It can lead to breathing difficulties if the lungs become affected. RSV is most common between November to January, and RSV season can last up to five months. RSV may be causing the cold and sniffles your child has during these winter months. Nearly all children will have their first RSV infection by the time they are two years old.

For babies less than three months old, born prematurely, prone to lung infections or with a congenital heart problem, they could be at greater risk of requiring hospitalization if they catch RSV.

What are the symptoms?

RSV is similar to a common cold (blocked nose, cough, sneezing and mild fever) and usually lasts between one to three weeks. However, if the lungs are affected, you may see one or more of these symptoms:

- A cough that gets worse
- Wheezing, which is a whistling sound during breathing
- Difficulties or increasing distress while breathing
- Difficulty with feeding and drinking because of breathing difficulties

How you can help

Offer babies extra fluids, and keep them cool and not overdressed if they get a fever. Acetaminophen medication can be given, or ibuprofen liquid if your baby is over six months old. Be sure to check the label of the medication carefully and ask your pharmacist for the right dose for your baby's weight and age.

If your baby has increased difficulty breathing, take him or her to your local emergency room department. They might need to be admitted to the hospital. Staff may give oxygen and maybe breathing support and medication to help.

Reducing the risk of infection

Viruses like RSV pass easily between people through hand contact or in droplets in the air. It is more likely to spread where there are groups of young children and in crowded places. During the winter months, try to reduce your baby's exposure to crowds and public transit. Ask people not to hold your baby if they have cold-like symptoms.

Take extra care to wash toys, highchairs and work surfaces, as RSV can live for several hours on those. Wash and dry your hands (use hand sanitizer if soap and water is not available) frequently, and encourage other adults and children to do the same.

Unfortunately, catching RSV once does not make your baby immune to catching it a second time.

Smoking

Babies born early and those with fragile lungs can be seriously affected by cigarette smoke. Exposure to smoke has been found to significantly worsen the symptoms of RSV in young babies.

Quitting smoking is not easy, but it is worth the effort. If you are finding it hard to stop, try to smoke only outdoors when your baby is not with you, and encourage others to do the same. For help on quitting smoking, talk to your doctor or pharmacist.

Long-term effects of RSV

The long-term effects of RSV will depend if your baby had any problems with the infection, and how RSV affected their lungs. Babies recovering from RSV often remain wheezy or become wheezy when they get new colds.

There is no vaccine that protects against RSV. However there is an antibody injection that, if given monthly during RSV season, reduces hospitalization in 'high risk' children. Speak with your doctor or the neonatal staff caring for your baby to discuss whether this type of protective therapy is appropriate.

Pneumonia

Pneumonia is an infection of the lungs. It can happen spontaneously or after a cold, flu or other illness.

What are the symptoms?

The symptoms of pneumonia include a cough, rapid breathing, wheezing or breathing difficulties and bloating and pain in the abdominal area.

How you can help

Visit your doctor if you think your baby has the symptoms of pneumonia. Sometimes pneumonia can be treated at home with antibiotics, but other times infants might need to be hospitalized to help with their breathing and receive intravenous antibiotics.

There are immunizations available in the first six months of life that can protect against some types of pneumonia.

When to call the doctor

Call your doctor if your baby has any of the symptoms of pneumonia, is more sleepy than usual, or has any troubles breathing.

Remember

- Wash and dry your hands well before and after handling your baby, and encourage others to do the same. Use sanitizer if soap and water are not available.
- Encourage friends and family who have cold-like symptoms to visit once they are well.
- Avoid second hand smoke near your baby.
- Talk about the risks of RSV with your doctor to see if your baby is eligible for the protective therapy.

Bronchopulmonary Dysplasia

Bronchopulmonary dysplasia (BPD is commonly known as chronic lung disease. Almost all babies (who remain healthy following their discharge from NICU) show steady improvement from their initial breathing difficulties. Some children with chronic lung disease are discharged from hospital with oxygen.

Babies with BPD are more likely to have colds affect their lungs. For these babies, readmission to hospital may be needed to monitor their breathing and provide extra oxygen. Occasionally some babies need help breathing from a ventilator.

Influenza

Influenza (or the flu) is a viral infection of the lungs and upper airways. Several types of influenza cause pneumonia, including H1N1 (swine flu). Those at risk for becoming seriously ill from influenza include very young children, those over 65, and people with long-term health problems like asthma or diabetes. Pregnant women are at high risk of becoming seriously ill from the H1N1 virus. Flu viruses spread through hand contact or through droplets in the air when people cough or sneeze.

It is recommended that all children who are over six months of age receive the seasonal flu vaccine. Pregnant women should also receive the vaccine to protect themselves and to help their babies by providing passive immunity. The flu virus changes itself from year to year; that is why people can catch influenza more than once. Therefore, the vaccine is recommended yearly.

What are the symptoms?

The first signs of influenza are a high fever and fatigue, and a loss of appetite is typical. Unlike the common cold, the flu is more likely to cause generalized aches and pains, stomach aches, vomiting and diarrhea. Infants may also present with breathing symptoms of pneumonia or bronchiolitis. Fever and muscle aches usually last only two to four days, but cough and tiredness can continue for one to two weeks or more.

How you can help

Offer babies extra fluids, and keep them cool and not overdressed if they get a fever. For fever or pain, acetaminophen medication can be given, or ibuprofen liquid if your baby is over six months old. Be sure to check the label of the medication carefully or ask your pharmacist for the right dose for your baby's weight and age. Over-the-

counter cold and flu medicines are not recommended for children under the age of six. Health care professionals advise that most of the flu remedies you can buy at the pharmacy don't work and can be potentially harmful for young children.

Reducing the risk of infection

Because the infection can recur, it is best to avoid crowded places during the winter months and to wash your hands often and thoroughly.

When to call your health care provider

- If you have a young baby, less than three months, or your baby has a lung or heart condition and you suspect flu symptoms.
- Call your doctor if your baby has any of the symptoms of pneumonia or bronchiolitis, is more sleepy than usual, or has any troubles breathing.
- If your baby is drinking very little, has less than four wet diapers in 24 hours and/or is showing other signs of dehydration.

Immunizations

After we are exposed to an infection, we produce antibodies in our blood. These are proteins produced by the body to fight infections. Full-term babies get antibodies from their mothers towards the end of the pregnancy to provide them with protection until they start their immunizations. Babies born early will receive fewer antibodies, and will be more vulnerable catching an infection. Therefore it is important not to delay your baby's immunizations.

It is important that your baby receive their immunizations according to your provincial guidelines. These guidelines recommend that your baby receive their first immunization at eight weeks of age (counting from their birth date, not their due date). Parents should also review their own immunization status with their health care provider to reduce the risk of bringing infections into the home. Ask your doctor or nurse if you have any concerns, or for more information.

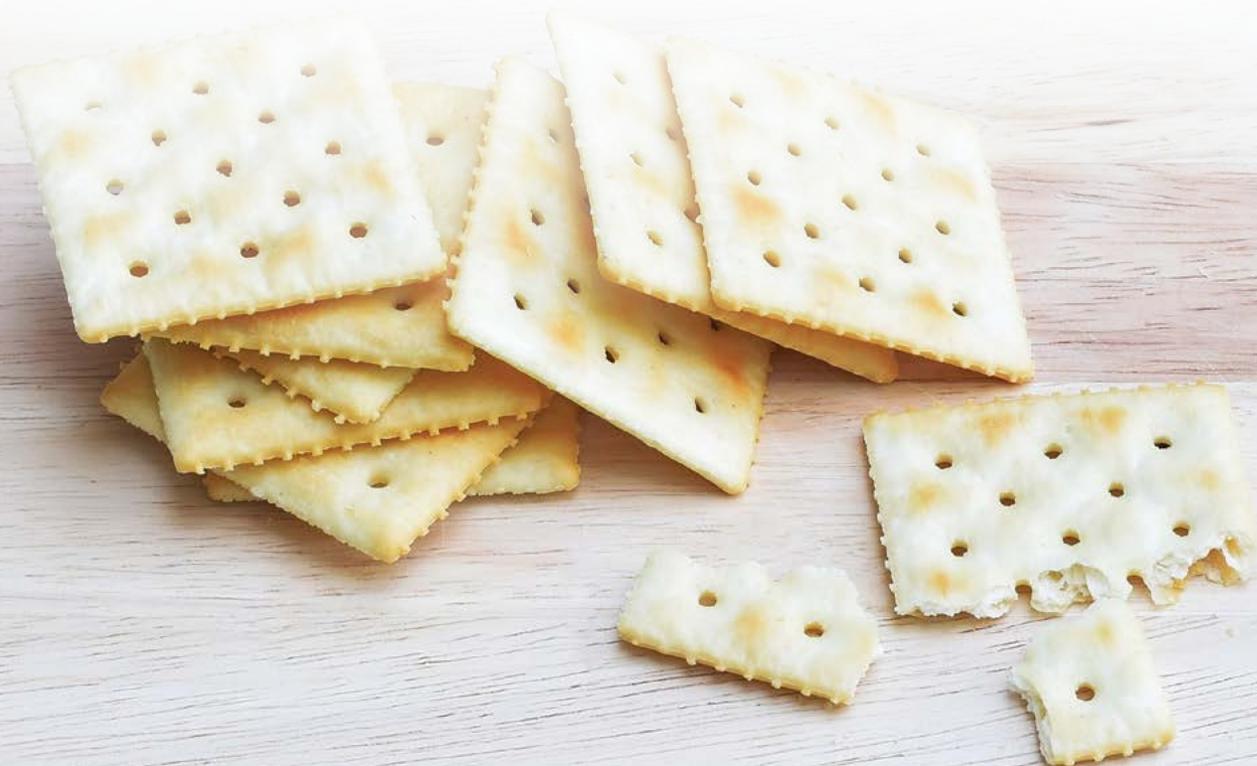
Winter Vomiting Bug

The winter vomiting bug (or tummy flu) is more common in the winter, but it can occur any time of the year.

This Norovirus is very contagious and causes vomiting and diarrhea. It will have to run its course as it has no specific treatment. It should not last more than a couple of days.

What should I do?

- Give babies plenty of fluids so they do not get dehydrated. Babies and young children can still drink milk.
- If your baby has a fever, keep him or her cool and not overdressed.
- Acetaminophen medication can be given, or ibuprofen liquid if your baby is over six months old. Be sure to check the label of the medication carefully or ask your pharmacist for the right dose for your baby's weight and age.
- Encourage your child to eat easy to digest items as vomiting settles, as this will shorten the duration of diarrhea. Easy to digest foods would include items like cereal or crackers. Avoid giving tomatoes, orange juice and other acidic foods and drinks.
- If your baby has symptoms for more than a couple of days, or is showing signs of dehydration, contact your health care professional.



Rotavirus

Rotavirus is the most common cause of serious diarrhea in babies between six months and two years of age. Almost all children will have rotavirus diarrhea before they are five years old. The virus is spread directly, by touching someone who has the infection, or indirectly through touching toys, highchairs or work surfaces that have been touched by someone with the infection. The virus can be spread before and after children develop symptoms.

What are the symptoms?

The first signs are high fever and vomiting. Within 12 hours to one day, your baby will start to have large amounts of watery diarrhea. It usually lasts three to eight days.

How can I help prevent Rotavirus?

- Ask your health care provider about the rotavirus vaccine.
- Wash your hands with soap and water, and dry them well, especially after changing your baby's diaper. Use a hand sanitizer if soap and water are not available.
- Keep your child home from daycare or school until there are no symptoms for at least 24 hours.

What should I do if my baby has symptoms?

If your child has mild diarrhea, offer plenty of fluids. If your child has more severe diarrhea, you can offer them an oral-rehydration solution (ask your pharmacist or doctor for a recommendation). In severe cases, your baby might have to be treated with IV fluids in the hospital.

When to call your health care professional

If your infant shows signs of dehydration. These include:

- Less than four wet diapers in 24 hours
- Not being able to drink
- Vomiting that won't stop
- Not being able to form tears
- Having dry skin, mouth and tongue
- Having a faster heart beat
- Sunken eyes or grayish skin
- Sunken soft spot on the top of your baby's head



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References

For more information about winter illnesses, visit:
Canadian Pediatric Society: www.caringforkids.cps.ca

For more information specifically about the flu, visit:
http://www.caringforkids.cps.ca/handouts/influenza_in_children

Préma-Québec, a provincial association for premature infants

Préma-Québec, a provincial association for premature infants, has as its mission to improve the quality of life of premature babies and their families. The main focus of the organization is to offer moral support to parents affected by prematurity, financial assistance if needed and educational material tailored to their needs. We are the only provincial organization that supports parents of premature children.

To learn more about our association, how to help or see how we can help you, please visit our website at www.premaquebec.ca

**You can also follow us on Facebook
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