



A guide to...

Croup **(Laryngotracheobronchitis)** ***Patient Information***

Children's Emergency Department (CED)
Watford General Hospital



Caring for your child with Croup

Your child has been diagnosed with croup.

We are happy that your child is well enough to be taken home under your supervision.

What is it?

Croup is an acute viral infection of the airway, affecting the larynx (voice box), trachea and bronchi (large air passages into the lungs). It leads to an inflammation of the inner layer (mucous membranes) of these air passages.

The inflammation causes pain and narrowing of the airway; this narrowing causes a barking cough, which is typical of croup. It can also cause a harsh sounding noise when you breathe in; this is called stridor and indicates an obstruction to the airway.

Where does it come from?

Croup can be caused by different viruses; this does mean you can get it more than once. It can also be caused by a foreign body obstruction.

In viral croup, the illness usually starts like a cold with a fever, runny nose and cough. Commonly, the barking cough and stridor worsen at night.

It is most common during that autumn and spring, but can occur any time during the year and is spread by droplets sprayed into the air when coughing or sneezing.

Who is usually affected?

Croup is common in young children between the ages of six months and 6 years. As children get older, their breathing tubes become wider and firmer, therefore the obstructive symptoms of croup becomes less common.

Treatment

Your child may be observed for a short period and discharged when concerning symptoms have resolved

- Mild episodes of croup may require no treatment
- If your child is assessed as having a moderate episode, they may require a single steroid dose to help reduce inflammation; this is usually given orally but can be inhaled via nebuliser in some instances. If prescribed, this would be given before you are discharged home.
- Antibiotics do NOT help as this is a viral illness

How long does it last?

Usually your child will recover within three to five days and will not have any ongoing complications.

RED FLAG (WORRYING) SYMPTOMS)

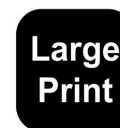
If your child has any of the following, please seek urgent medical assessment:

- Harsh sound when breathing (stridor)
- Cyanosis — blue discolouration commonly seen around the mouth and nose
- Laboured breathing
- Irritability, restlessness and agitation
- High pitched cry in babies over six months
- Dehydration — significant decrease in wet nappies is a common sign in babies
- Drooling, unable to swallow
- Inability to talk.

What can you do to help your child?

- Be calm and reassuring as when your child cries, it puts more strain on their breathing
- If your child has a raised temperature causing them to feel unwell, or has pain, then give over the counter medications such as paracetamol and ibuprofen to relieve symptoms if age appropriate, and recommended by your clinician.
- Give your child plenty of cool drinks as tolerated
- Cool air has been shown to be beneficial during periods of increased difficulty in breathing in croup; taking your child outside may help — please ensure that they are dressed appropriately for the weather.
- Do **NOT** make your child lie down or drink fluids if they don't want to.
- Do **NOT** use steam — this has not been shown as an effective treatment and unfortunately, children have sustained burns to their faces and breathing tubes secondary to steam inhalation practices.

If you need this leaflet in another language, large print, Braille or audio version, please call **01923 217 187** or email **westherts.pals@nhs.uk**



Author	Sian Edwards
Department	Children's Emergency Department
Ratified / Review Date	January 2025 / January 2028
ID Number	40/2362/V1

