

Children's Services – Information for parents

Croup

What is croup?

Croup is a common childhood illness. It is sometimes called laryngotracheobronchitis.

What causes croup?

Croup is most commonly caused by a viral infection (85% are viral in origin). The virus causes swelling and narrowing of the upper airways, voice box (larynx), and windpipe (trachea) making it difficult for your child to breathe.

Who is most likely to get croup?

Croup usually affects children of less than five years of age, but can also affect older children and teenagers. Girls and boys are equally affected.

What are the symptoms of croup?

Children with croup usually have some of the following symptoms:

- A harsh barking cough.
- A hoarse voice.
- A noise when breathing in, which is called stridor.

Before developing croup, most children will have a runny nose, perhaps a sore throat and temperature, gradually leading to a harsh barking cough.

How is the diagnosis of croup made?

In order to make a diagnosis of croup, a full history is taken by the doctor, looking for the following features:

- Harsh barking cough
- Fast breathing and heart rate
- Stridor
- Difficulty when breathing in

Would any tests be carried out?

There are no tests to help in diagnosing croup.

How do we treat croup?

At home:

Most children with croup can be cared for at home, as croup is usually a mild, self-limiting disease. There are things that you can do to help your child feel more comfortable:

- Stay calm and reassure your child.
- Offer your child their favourite drink in small, frequent amounts to keep him/her well-hydrated.
- Keep your child cool.
- Give paracetamol or ibuprofen to help with the fever.
- Rest is very important, as activity may make symptoms worse. Try reading, watching television or a video with your child.

In hospital:

Some children with croup will be given a medication called dexamethasone which helps reduce the swelling of the windpipe.

What does not help with the management of croup?

You may be advised (by friends or relations) to use mist, steam or humidified air, but these are unlikely to be effective in the treatment of croup. Be careful if you do use these, as there is a danger of scalding.

When should you seek medical help, following discharge from hospital?

Your child will be discharged from hospital only when he/she is considered well enough.

You should seek medical help if your child:

- Has a stridor when they breathe when they are quiet or asleep
- Has a very high temperature ie. above 39 °C (102 °F)
- Is drooling
- Has a poor fluid intake over 12-24 hours

When should I call an ambulance?

- If your child has difficulty in breathing.
- If your child becomes floppy, agitated or confused.
- If your child's lips or face become pale or blue.

Long term outcome of croup

Children usually recover quickly from croup, though they may be tired and off their food for a few weeks following the infection.

Croup does not usually result in any long-term chest problems.

Name of child:

Date of hospital admission:

Treatment discharged on:

Outpatient follow-up appointment:

If you have any further questions do not hesitate to ask the nursing staff.

If you are at all concerned about your child, please contact:

Ward

Tel: 01223



We are currently working towards a smoke-free site. Smoking is only permitted in the designated smoking areas.

For advice and support in quitting, contact your GP or the free NHS Stop Smoking helpline on 0800 169 0 169

Help with this leaflet:



If you would like this information in another language, large print or audio format, please ask the department to contact Patient Information: 01223 216032 or

patient.information@addenbrookes.nhs.uk



Document history

Authors	Children's Services
Department	Cambridge University Hospitals NHS Foundation Trust, Hills Road, Cambridge, CB2 0QQ www.cuh.org.uk
Contact number	01223 245151
Publish/Review date	June 2007 (no changes made)/June 2014
File name	Croup
Version number/Ref	3/ PIN0002