

WHAT EVERY PARENT SHOULD KNOW

About colds, coughs, earaches and sore throats

Having a sick child can be a very scary experience for parents and carers. Understanding more about common childhood illnesses and symptoms can help you feel more in control.

This information deals with common symptoms and infections of the ear, nose, throat and chest in children who are usually healthy.

It does not apply to children who have ongoing health problems such as asthma, heart or kidney problems or to babies less than 3 months old. Young babies can respond differently to infections.

Talk to your doctor if your child fits any of these categories.

What can I do to help my child feel better?

A child's immune system is very powerful and will clear up most common infections by itself.

You can help your child feel better by

- ▶ making sure they get plenty of rest
- ▶ making sure no one smokes around them.

Encourage your child to drink water. This loosens phlegm and lubricates the throat, so coughing should be less uncomfortable. Try to avoid sugary drinks.

If your child has a headache or fever and is irritable or uncomfortable, paracetamol or ibuprofen can help them feel better.

How long will the symptoms last?

Most of these types of symptoms and infections are self-limiting – they will go away without any treatment.

- ▶ **In 3 days:**
6 out of 10 children will no longer have a sore throat.
- ▶ **In 7 days:**
9 out of 10 children will no longer have an earache.
- ▶ **In 15 days:**
9 out of 10 children will no longer have a cold.
- ▶ **In 25 days:**
9 out of 10 children will no longer cough.

Why not take antibiotics?

There are several reasons why it is not a good idea to take antibiotics unless they are really needed.

- ▶ Using antibiotics can make bacteria resistant to antibiotics. In other words, the antibiotics will no longer work against the bacteria. Someone who has recently taken antibiotics is more likely to have resistant bacteria in their body. Some bacteria have become resistant to almost all antibiotics.
- ▶ Using antibiotics when they are not needed may mean they won't work when they are needed in the future eg, for a serious or life-threatening infection.
- ▶ Most antibiotics have side effects, eg, diarrhoea, rashes and stomach upsets.
- ▶ Antibiotics kill our natural bacteria that help to protect us. This can result in infections such as thrush (candida).
- ▶ Antibiotics can also cause allergic reactions. These are often just annoying rashes, but can, in some cases, be severe reactions.

For more information

Visit the NPS MedicineWise website for more information about specific symptoms that can be of concern in children's illnesses.

www.nps.org.au/rtisymptoms

Call the NPS Medicines Line: **1300 MEDICINE** (1300 633 424) (Monday to Friday 9 am – 5 pm AEST) to speak with a health professional for free independent information about medicines.

When should I seek further help?

If you are still worried about your child after reading this information, then you should get advice. This could be telephone advice or a consultation with your GP.

If you feel that it is an emergency, dial 000 for an ambulance.

Signs of possible serious illness

- ▶ Your child is **drowsy or irritable** and does not improve after treatment with paracetamol and/or ibuprofen. If they are very drowsy, they should see a doctor urgently.
- ▶ Your child has **problems breathing** – including rapid breathing and being short of breath or ‘working hard’ to breathe (it sometimes looks as though the skin between the ribs and below the ribs get sucked in each time they breathe). Any child who has a lot of difficulty breathing needs to see a doctor urgently.
- ▶ You notice **cold or discoloured hands or feet** with a warm body
- ▶ Your child has a **convulsion**.
- ▶ You notice unusual skin colour (pale, blue or dusky around lips)
- ▶ A temperature of 39 °C or more in a child aged 3–6 months of age (an infant who is less than 3 months of age should be assessed if they have a temperature of 38 °C or more).
- ▶ Most children can go a few days without eating much. However an infant who is **not feeding** or any child who is showing **signs of dehydration**, such as dry mouth, sunken eyes, no tears or weeing less, should be assessed. This is especially true for young children (under 1 year) and those who are vomiting.
- ▶ Your child is unable to swallow, is drooling more than usual and looking generally unwell.
- ▶ Your child shows **symptoms related to meningitis**: unusually severe headache, a stiff neck (difficulty putting chin to chest), dislike of bright lights, and a rash that does not fade with pressure.

Other symptoms that mean you should take your child to a GP

- ▶ A **cough that hasn't improved in 3 weeks** in an otherwise well child (or sooner if becoming breathless easily or there is a family history of asthma).
- ▶ Any fever lasting 5 days or more.
- ▶ Persistent hearing problems.

When might my child need antibiotics?

Children rarely need antibiotics for colds, coughs, earaches and sore throats. These types of infection are usually caused by a virus, which cannot be treated with antibiotics.

However, there are uncommon situations where your doctor may decide your child needs to take antibiotics. Examples include:

- ▶ an earache with fluid coming from a sore ear
- ▶ an earache in a child of Aboriginal or Torres Strait Islander descent, who may be at increased risk of complications
- ▶ a sore throat in a child from an Aboriginal community in central or northern Australia, or of Maori or Pacific Islander descent, who may be at increased risk of complications
- ▶ a cough that is suspected or found to be whooping cough (pertussis) or bacterial pneumonia.

If you think any of these situations might apply to your child, take them to see your doctor.

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