

What's Going Around: Changing weather causing breathing issues in kids

By Ali Lanyon Published: November 30, 2017, 4:55 am Updated: November 30, 2017, 5:51 This week, WellSpan Medical Group providers are seeing an increase in chest infections, including bronchitis and asthma, possibly due to shifting weather. WellSpan Medical Group providers are also continuing to see an increase in the number of viral upper respiratory infections. WellSpan Medical Group providers would like to remind everyone that techniques such as frequent handwashing and coughing into the inside of your elbow can reduce the risk of infection. If in a home with someone affected, disinfecting surfaces such as counters and door knobs is also recommended.

This week, Lancaster General Health Physicians Roseville Pediatrics saw an increase in bronchiolitis, strep throat, pink eye and gastroenteritis, or the stomach bug.

They have seen continued high numbers of croup cases and viral colds, as well as an increase in asthma exacerbations, or attacks, as cold temperatures and viral illnesses are common triggers of asthma in all ages.

Dr. Joan Thode offered the following advice about wheezing:

“Wheezing is a high-pitched, whistle-like sound, either with inhale or exhale, that is related to inflammation in the lungs. Inflammation is caused by the immune system attacking a threat or perceived threat, and the result can be partial or complete closure of the small airways. Asthma and bronchiolitis are two of the most common causes of wheezing in the pediatric population.

Asthma is a chronic condition of either frequent flares of this inflammation or a more persistent, smoldering inflammation. Asthma technically cannot be formally diagnosed until after the age of 2 years, but infants and young toddlers can get wheezing related to specific viral or bacterial lung illnesses. Infants and toddlers with wheezing discovered in relation to an infection are not guaranteed to have asthma later in life, but they should be watched a bit more closely.

Bronchiolitis is a virus-induced inflammation of the tiniest of the airways. This typically affects only babies and toddlers. The issue with bronchiolitis is that the small airways can swell shut/fill with mucous, which prevents oxygen from getting to the air sacs at the end.

Any case of wheezing should be evaluated by a physician, because wheezing- regardless of the source- indicates inhibited air flow through the lungs.

Many, but not all, cases of wheezing can be helped with nebulizer or inhaler treatments, though sometimes other interventions are needed.

If you notice sustained fast breathing, using the belly to breathe, having an exaggerated expansion of the ribcage with every breath, called “retractions,” inability to eat or drink due to fast breathing, and/or any purple or blue color around the mouth or lips, call your child’s doctor right away.

Geisinger Holy Spirit Pediatrics in Cumberland and Dauphin counties also reports long-term coughs and coughs with colds, strep throat and pink eye.

At their primary care locations, they are seeing the following:

Geisinger Holy Spirit Primary Care Duncannon: sinusitis

Geisinger Holy Spirit Primary Care Carlisle: common cold, upper respiratory issues

Geisinger Holy Spirit Primary Care Mechanicsburg: coughs, colds, UTIs, gastrointestinal issues

UPMC Pinnacle’s Heritage Pediatrics in Camp Hill has seen a lot of bacterial conjunctivitis, or pink eye. Many children are also developing ear infections at the same time and are needing eye drops and an oral antibiotic to treat both infections.

Conjunctivitis is inflammation of the lining of the eye that causes redness of the inside lining of the eyelids and/or the white part of the eye, thus giving the appearance of a “pink” eye. Bacterial conjunctivitis also causes a thick discharge that often leads to pasting or crusting of the eyelashes.

This is very contagious and is spread through direct contact, according to Dr. Kathleen Zimmerman. It is easily passed by younger children playing together and through sharing of toys and often seen in daycare settings.

The best prevention is hand washing and avoiding rubbing of the eyes. Treatment is with antibiotic eye drops that need to be prescribed.

A red eye or eye with discharge should always be examined by a provider because there are other causes of red eyes, and also they need to make sure there is not an associated infections, such as an ear infection.