On the Airwaves! Dr. Kardos talks about the latest in pediatrics on “Your Radio Doctor”

Episode 190 – Current Topics in Pediatrics

Listen here as Dr. Kardos talks about the latest in pediatrics on “Your Radio Doctor” with Dr. Maryanne Ritchie.

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Protection against severe RSV-we finally have it!

protection for babies against severe RSV

Which is it: the flu, RSV, or

COVID?



Photo by Leeloo, Prexel

Parents ask us every day the difference between the flu (influenza), RSV (respiratory syncytial virus), or COVID (coronavirus disease 2019). While no method is fool proof, here are some typical differences among these viruses:

The flu, caused by influenza virus, comes on suddenly and makes you feel as if you've been hit by a truck.

Flu almost always causes fever of 101°F or higher and some respiratory symptoms such as runny nose, cough, or sore throat (many times, all three). In addition to the usual respiratory symptoms, the flu causes

body aches, headaches, and often the sensation of your eyes burning. Fever can last 5-7 days. Children, more often than adults, can vomit and have diarrhea along with their respiratory symptoms, but contrary to popular belief, there is no such thing as “stomach flu.” All symptoms come on at once; there is nothing gradual about coming down with the flu.

COVID can cause the same symptoms. Since home COVID tests are readily available, you can answer the question of “Flu or COVID?” at home.

Colds, even really yucky ones from RSV, come on more gradually.

RSV, a common cause of the common cold, is notorious for causing very thick mucus. The mucous is why some babies and young children have more severe coughing and breathing difficulties with this particular cold virus. Our immune systems are not good at mounting a lasting immunity to RSV so kids and adults tend to get this virus again and again. The first time someone is hit with RSV is usually their worst episode.

Symptoms usually start out with a sore throat or mild runny nose. Gradually, the nose runs more and a cough starts. Sometimes RSV can cause fevers for a couple of days and some hoarseness. Children are often tired from interrupted sleep because of cough or nasal congestion. This tiredness leads to extra crankiness. To further complicate things, Covid can cause identical symptoms.

Usually kids still feel well enough to play and attend school with colds like RSV.

The average length of a cold is 7-10 days although sometimes it takes two weeks or more for all coughing and nasal congestion to resolve.

Wondering about the color of mucus?

The mucus from a cold can be thick, thin, clear, yellow, green, or white, and can change from one to the other, all in the same cold. The color of mucus in the first few days does NOT tell you if your child needs an antibiotic and will not help you differentiate between a cold and the flu.

So, is it the flu, RSV, or COVID?

- **Flu** = sudden and miserable
- **Colds**, including RSV = gradual and annoying
- **COVID** = either

If your child has several days of runny nose and cough, but is drinking well, playing well, sleeping well and does not have a fever, the illness is unlikely to “turn into the flu.” A home test can help tease out COVID from a cold or the flu.

And yes, a kid can have multiple respiratory viruses at the same time. Let’s hope that does not happen this winter.

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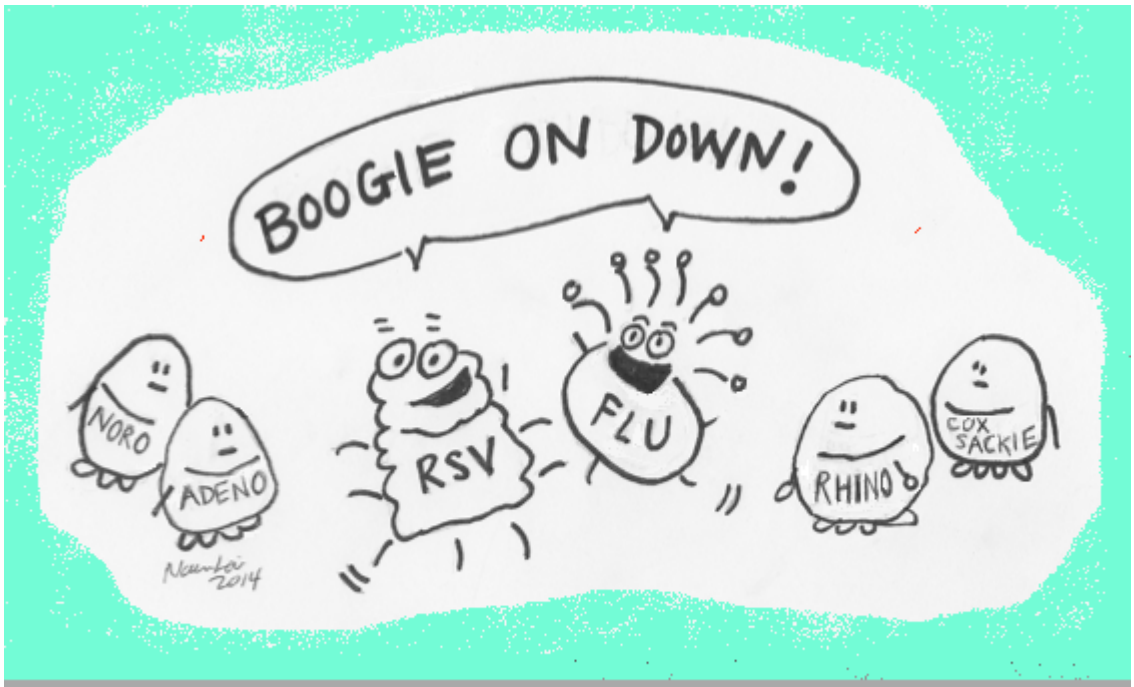
RSV: nothing to sneeze at!



At the New Year's winter party RSV and flu always got a little out of control.

"A baby in my child's daycare was hospitalized for RSV," panicked parents said to us the other day. But RSV (Respiratory Syncytial Virus) is not just a daycare phenomenon. As we are currently experiencing in our office, this virus causes MANY more run-of-the-mill office visits than hospitalizations.

Right now, RSV season is in full swing. RSV is one of the most common causes of the common cold. It is THE most common cause of childhood bronchiolitis (inflamed tiny airways in the lungs), but most of the time RSV causes a really miserable cold without any other complications. Most of us have had RSV many times. RSV tends to be particularly tough on babies and toddlers because the worst episode of RSV is usually the first time you catch the germ.

RSV glues to cells from the nose down to the lungs, causing breathing difficulties. The boogies from RSV tend to be very thick and kids' lungs goo-up, sometimes causing a wheeze (like that of a person with asthma). The cough from RSV can easily last a month. The disease can be very dangerous in young infants, babies born earlier than 38 weeks (premature), and

babies with chronic lung and heart disease, because of their inability to clear the gunk that RSV produces in their airways. Some kids get fever with RSV and some do not.

Like all cold viruses, no medication kills RSV, so the germ needs to "run its course." The third through the fifth day of the illness are generally the peak days for symptoms. Here are ways to help your ill child:

- Stay away from the over-the-counter cough and cold medicines– they can have more side effects than helpful effects.
- If your child is over one year old, honey can help relieve the cough . Try giving 1 teaspoon 3-4 times a day.
- For the little ones who can't (or won't) blow their noses, put a drop or two of nasal saline in each nostril and use a suction device like a bulb syringe to pull out the discharge. Warning: over-zealous bulb suctioning, more than three to four times a day, can be irritating to the nose. Sometimes just the saline alone, without suction, is enough to promote sneezing which will catapult out the mucus.
- Run a cool mist humidifier in her bedroom or sit with your child in a steamy bathroom so water vapor loosens her congestion.
- Give acetaminophen (if over two months of age) or ibuprofen (over six months of age) as needed for fever or discomfort from a clogged head.

Just like you when **you** have a cold, your child may lose her appetite because she has a belly full of post nasal drip and overall feels lousy. Do not fret over her lack of food intake, but do hydrate her well. Breast milk or formula, because of their nutrition, is the best choice for hydrating infants with a cold. For older children, encourage water, but if your child is not eating, make sure there is salt and sugar in her fluids to keep her going. Don't be afraid to give your child milk

when she has a cold. Good old-fashioned chicken broth is another great source of hydration.

For kids under two years of age, avoid the use of smelly chest rubs containing menthol or camphor (e.g. Vicks Vapor Rub) and in older children, don't introduce a rub for the first time when your child is ill. When he is sick is a terrible time to discover that a chest rub sends your child into an allergic coughing fit or to discover that he hates the smell.

How do you know if you need to take your child to the doctor? Read here to help you decide. Watch for signs of difficulty breathing: rapid breathing, ribs sticking out each time your child breathes in (click here for our video example of this), and/or belly moving in and out with each breath, and grunting. A child who is short of breath will be unable to breathe and drink at the same time. A child who is inconsolable with RSV might have additional infections such as pneumonia, ear infections or sinus infections.

Since our immune systems do not make a long-lasting antibody response to RSV, our bodies do not "remember" RSV, and we can catch it again and again. This makes the creation of an RSV vaccine difficult, because vaccines work by boosting our natural defense systems. Vaccines cannot boost an immune response that does not occur naturally.

Take heart, even if your child gets RSV every winter, each episode will usually be less severe than the last. Just look at us pediatricians, we have contracted it so many times, we may sneeze only once before the germ retreats.

Hopefully your family escapes RSV this year! Continue good hand washing and encourage your child to cough into his sleeve to prevent spread of RSV and other Really Sick Viruses.

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