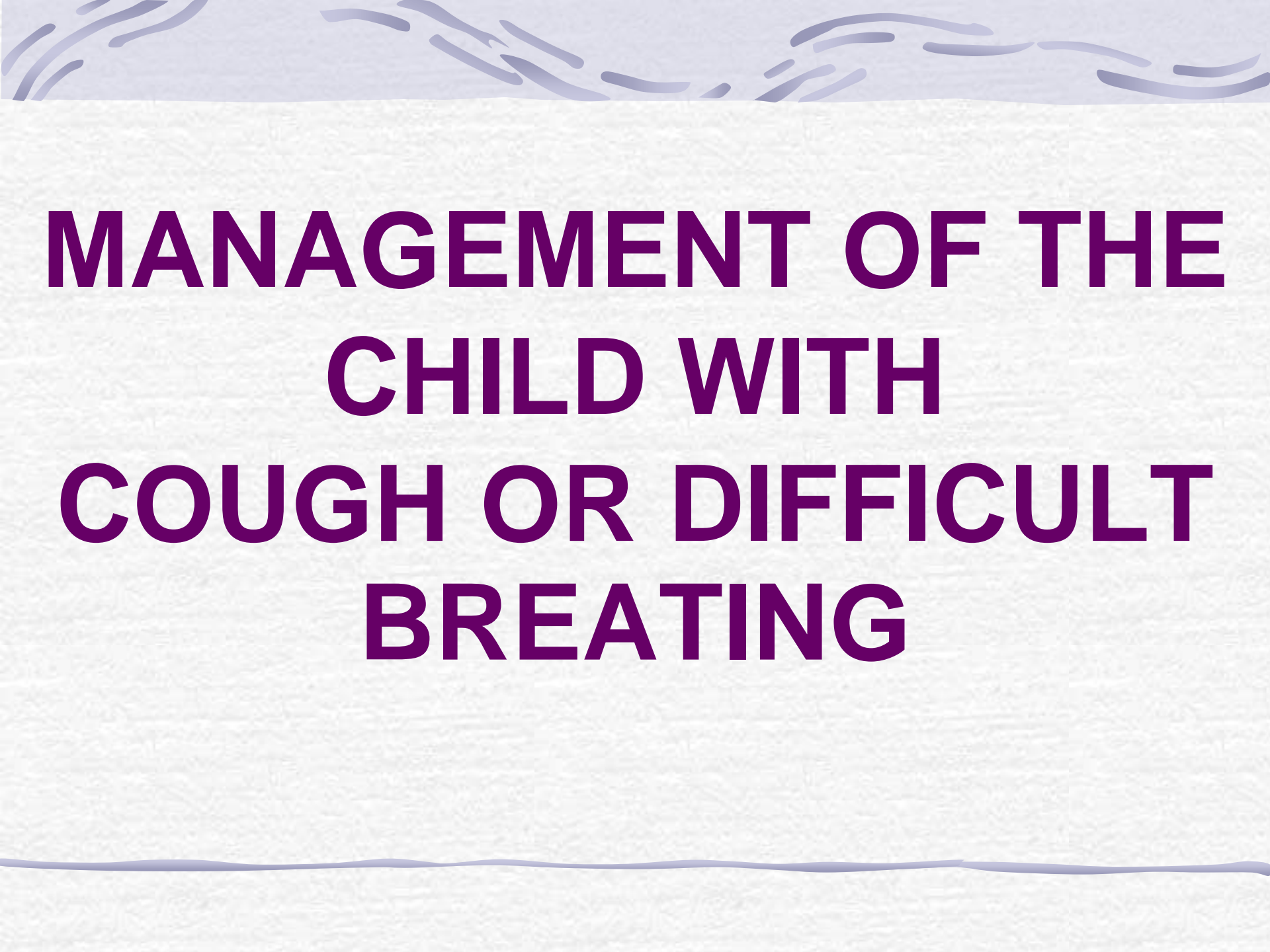




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COUGH OR DIFFICULT BREATHING

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MANAGEMENT OF THE CHILD WITH COUGH OR DIFFICULT BREATHING



Assess:-

Ask

Look

Listen



Ask

1. How old is the child ?
2. Is the child coughing ? For how long ?
3. Is the child able to drink ?
4. Has the young infant (age < 2 months) Stopped feeding well ?
5. Has the child had fever ? For how long ?
6. Has the child had convulsions ?

Look, Listen (Child must be calm)

1. Count the breath in one minute
2. Look for lower chest indrawing
3. Look and listen for stridor
4. Look and listen for wheeze. Is it recurrent ?
5. See if the child is abnormally sleepy, or difficult to wake
6. Feel for fever, or too cold
7. Check for clinically severe undernutrition



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Classify the Illness

The child age 2 months - 5year

Does child have danger signs ?

1. Not able to drink
2. Convulsions
3. Abnormally sleepy or difficult to wake
4. Stridor in a clam child
5. Clinically severe undernutrition

Classify As:

Very severe disease

Treatment of very severe disease:

- * Refer URGENTLY to hospital
- * Give first dose antibiotic
- * Treat fever, if present
- * Treat wheezing, if present
- * If cerebral malaria is possible, give antimalarial



Does Child have Pneumonia ?

Signs: **Lower chest indrawing**

Classify as Severe Pneumonia



Treatment of Severe Pneumonia:

- * Refer URGENTLY to hospital
- * Give first dose antibiotic
- * Treat fever, if present
- * Treat wheezing, if present (if referral is not feasible, treat with antibiotic and follow closely)

B:- No chest indrawing, and

Fast breathing

(50 per minute or more if child 2 months up to 12 months;

40 per minute or more if child 12 months up to 5 years)

Classify as Pneumonia

Treatment of Pneumonia:

- * Advise mother to give home care
- * Give antibiotic
- * Treat fever, if present
- * Treat wheezing, if present
- * Advise mother to return with child in 2 days for reassessment, or earlier if the child is getting worse

C:- No chest indrawing, and

No fast breathing

(less than 50 per minute if child 2 months up to 12 months;

Less than 40 per minute if child 12 months up to 5 years)

**Classify as No Pneumonia:
Cough or Cold**

Treatment of No Pneumonia:

Cough or cold:

- * If coughing more than 30 days refer for assessment
- * Assess and treat ear problem or sore throat, if present
- * Advise mother to give home care
- * Treat fever, if present
- * Treat wheezing, if present

Reassess in 2 days a child who is taking an antibiotic for pneumonia

Signs	Worse <ul style="list-style-type: none">•Not able to drink•Has chest indrawing•Has other danger signs	THE SAME	IMPROVING <ul style="list-style-type: none">•Breathing slower• Less fever•Eating better
Treatment	Refer URGENTLY to hospital	Change antibiotic or refer	Finish 5 days of antibiotics

The Young Infant (Age < 2 Months)

Does Child have danger signs ?

- * Not able to drink
- * Convulsions
- * Abnormally drowsy or difficult to wake
- * Stridor in calm child

- * Stopped feeding well
- * Grunting
- * Wheezing
- * Fever or feels too cold
- * Cyanosis

Classify As: Very Severe Disease

Treatment:

- *Refer URGENTLY to hospital for antibiotic by injection if any of the above signs
- * Keep young infant warm
- * give first dose antibiotic (preferably inj.)

Does child have pneumonia ?

Signs:

- * Fast breathing (60/ minute or MORE) or
- * Severe Chest indrawing

Classify As: Severe Pneumonia

Treatment:

- * Refer URGENTLY to hospital
- * Keep young infant warm
- * Give first dose antibiotic

Signs:

- * No fast breathing (< 60 per minute)
- * No severe chest indrawing

Classify As:

No Pneumonia:

Treatment:

- * Advise mother to give home care
- * Keep baby comfortable warm
- * Breastfeed frequently
- * Clear nose if it interferes with feeding
- * Watch for signs of illness

Advise Mother to Return if:

- * Breathing becomes difficult
- * Breathing becomes fast
- * Feeding becomes problem
- * The young infant becomes sicker
- * High fever

Treatment Instructions:

Give an Antibiotic

- * Give first dose on antibiotic in clinic
- * Instruct mother on how to give the antibiotic for five days at home (or return to clinic for daily procaine penicillin injection)

AGE or WEIGHT	Amoxicillin 125 mg / 5 ml •Three time daily for 5 days	Procaine Penicillin •Once daily for 5 days I/M INJ.
< 2 m (< 5 kg)	2.5 ml	200,000 Units
2 months - 12 months (6-9 kg)	5.0 ml	400,000 Units
12 months - 5 years (10-19 kg)	10.0 ml	800,000 Units

Advise Mother to Give Home Care:

(For the child age 2 months – 5 years)

Feed the child

- * Feed the child during illness
- * Increase feeding after illness
- * Clear the nose if it interferes with feeding

Increase Fluids

- * Offer the child extra to drink
- * Increasing breast feeding

- * Soothe the throat and relieve the cough with a safe remedy**
- * Most important: In the child classified as having No Pneumonia: Cough or cold, watch for the following signs and return quickly if they occur:**

- * Breathing becomes difficult
- * Breathing becomes fast
- * Child is not able to drink
- * Child becomes sicker

This child may have
Pneumonia

Treat Fever

*** Fever is high
($\geq 39^{\circ}\text{C}$)**

*** Fever is not high
($< 39^{\circ}\text{C}$)**

*** Give Paracetamol**

*** Advise mother to care home**

Paracetamol dose: → Every six hours

Age or Weight	500 mg tablet	Syrup 120 mg 5ml
2 m –12 m 6-9 kg	0.25	5 ml
12 m- 3 yrs 10-14 kg	0.25	5 ml
3 yrs – 5 yrs 15-19	0.5	10 ml

Treat Wheezing:

***Children with first episode of wheezing**

- * If in respiratory distress → Give a rapid acting bronchodilator and refer
- * If not respiratory distress → Give oral salbutamol for 5 days

Children with Recurrent Wheezing (Asthma)

Give a rapid acting bronchodilator

Assess the child's condition 30 minute later

IF:	THEN
RESPIRATORY DISTRESS OR ANY DANGER SIGN	→ Treat for S.PNEUMONIA OR VERY VERY SEVERE DISEASE (Refer)
NO RESPIRATORY DISTRESS AND: FAST BREATHING →	Treat for Pneumonia (Include oral salbutamol)
NO FAST BREATHING →	Treat for No Pneumonia (Include oral salbutamol)

RAPID ACTING BRONCHODILATOR

<p>Nebulized salbutamol (5 mg/ml)</p>	<p>0.5 ml Salbutamol plus 2.0 ml sterile water</p>
<p>Subcutaneous Epinephrine (adernaline) (1:100= 0.1%)</p>	<p>0.01 ml per kg body weight</p>

ORAL SALBUTAMOL

* Three times daily for five days

AGE or WEIGHT	2 mg tablets	4 mg tablet
2 months – 12 months (< 10 kg)	1/2	1/4
12 months – 5 years (10-19 kg)	1	1/2

TRUNK