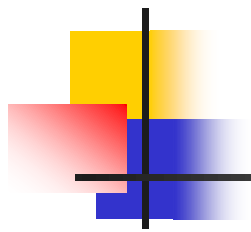




Dr. Zeeshan Ghani
Pediatrics Department
BBH Rawalpindi



CROUP



Croup:

- * Acute infectious disease
- * Barklike or brassy cough
- * Hoarseness, Inspiratory Stridor



Croup Syndrome

1-Laryngotracheobronchitis

2-Acute Epiglottitis

3-Acute infectious laryngitis

4-Spasmodic Croup



Laryngotracheobronchitis

Etiology

Parainfluenza virus **75%** (type 1,2,3)

Influenza A & B

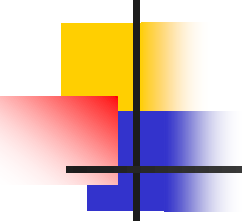
Adenoviruses

RSV



Clinical Features:

- * Age 3m – 5 yr
- * Male
- * Winter
- * Rhinorrhea, pharyngitis, mild cough
- * Low fever

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- * Barking cough, hoarseness, stridor
 - * Worse at night
 - * Resolve completely within a week
 - * Croup is clinical diagnosis
 - * X-ray neck shows “steeple sign”
(subglottic narrowing)



Treatment

(Laryngotracheobronchitis)

Mist / steam therapy

- * Moistens airway secretions
- * Soothes inflamed mucosa provide comforts

Nebulized epinephrine

- * 0.25 ml in 3 ml of normal saline every 20 min



Steroids are beneficial

- * Dexamethasone 0.6 mg/kg
- * Nebulized budesonide

No antibiotics

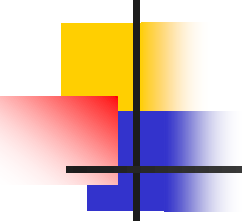
Hospitalized if

- * Progressive stridor
- * Stridor at rest
- * Respiratory distress
- * Cyanosis
- * Depressed mental status



Acute Epiglottitis:

- * Potentially lethal condition
- * Acute fulminating course
- * High fever, sore throat, dyspnoea
- * Rapidly progressing respiratory obstruction
- * Toxic, dysphagia

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- * Laboured breathing
 - * Drooling
 - * Hyperextended neck
 - * Rapidly increasing cyanosis
 - * Coma



Diagnosis:

- * “Cherry red” swollen epiglottis
- * X- ray neck lateral – swollen epiglottis
(Thumb sign)
- * Leucocytosis



Treatment:

- * Medical emergency
- * Establish an airway
- * Nasotracheal intubation or tracheostomy
- * Oxygen
- * Ceftriaxone or cefotaxime
- * Ampicillin + salbutamol



Acute infectious laryngitis:

- * Viruses cause most cases
(Diphtheria is an exception)
- * Sore throat, cough
- * Hoarseness and **loss of voice** out of proportion to systemic features
- * Physical examination is unremarkable
- * Laryngoscopy shows edema of vocal cords and subglottis tissue



Spasmodic Croup:

Age: 1-3 yr

- * Viral prodrome and fever in absent
- * Cause is viral or allergic
- * Attacks are sudden and at night
- * Child awakens with barking cough
- * Stridor and hoarseness
- * Improves within hours

Differential Diagnosis:



1-Bacterial tracheitis

2-Diphtheritic croup

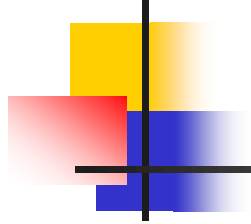
3-Measles croup

4-Foreign body aspiration

5-Retropharyngeal or peritonsillar abscess

6-Angioedema

7-Hypocalcemic tetany



Thank You