

Transient wheeze (“happy wheezer”)

What is wheezing?

Wheezing is a whistling sound that is common in young babies. Wheezing occurs when lower airways (“bronchioles”) are narrow or constricted, causing a whistling sound in the chest when the baby breathes out.

About a third of all children under one year of age will have episodes of wheezing and coughing.

What can cause wheezing?

There are several different causes of wheezing in young children.

Bronchiolitis – This is an infection caused by one of several viruses (most commonly RSV). Bronchiolitis causes transient wheezing in babies, especially those under 6 months of age. Once the infection has passed, the wheezing usually stops (see separate handout on Bronchiolitis).

“Happy wheezers” or transient early wheezing - Babies (especially under the age of 6 months) have very small floppy airways which often cause turbulent airflow, which makes a wheezing sound. In many babies who wheeze, the wheezing occurs when the baby has an infection and stops when the baby gets better.

Some babies wheeze even when they are well. Most of these babies do not get into difficulty breathing or have any lasting problems from wheezing.

Transient wheezing usually stops altogether by about 3 years of age as the airways grow and widen.

Persistent wheezing – Children with wheezing that continues beyond the preschool years are more likely to have allergies than children whose wheezing stops. Signs of allergy include having eczema, hay fever, or a runny nose without a cold. The combination of continuing wheezing and allergies, or parents having

allergies or asthma, further increases the chance that wheezing will continue and asthma will develop.

When is wheezing asthma?

Because the muscles around the airways mature at around 12 months of age, most doctors will consider a diagnosis of asthma after the age of 1 year.

Diagnosing asthma in a baby can be quite difficult as there are lots of other illnesses which have similar symptoms, as mentioned above. No special test can be performed in young children to diagnose asthma, unlike adults who can perform a breathing test called Spirometry.

The way asthma is usually diagnosed in small children is through:

- History of the illness – the doctor will ask you questions about what symptoms your baby gets, when, and for how long
- Examination - your doctor may listen to your baby's chest and look at the way your baby breathes
- Response to asthma reliever medication (such as Ventolin) on 2 or more occasions.

A diagnosis of asthma usually takes time, and is best made by a doctor who knows your child and has seen him/her on more than one occasion over time. This is one reason that having a regular



general practitioner or paediatrician is so important.

How can I help my wheezing baby?

Most happy wheezers need no medications – all that is needed is time for the airways to strengthen as your baby grows.

Sometimes a doctor may prescribe a trial of asthma medication before 12 months of age to see if the symptoms respond to that treatment. Inhaled asthma medications are safe for babies even if they do not have asthma, and a response to ventolin does not necessarily mean your child will develop asthma.

How do I know if my baby will develop asthma?

If your baby has frequent episodes of wheeze and severe bronchiolitis requiring hospital treatment, this may increase the likelihood of asthma in later childhood.

Other risk factors for developing asthma are:

- Wheeze developing in later infancy
- Severe symptoms in infancy
- A family history of atopy (problems caused by allergies - such as hay fever, eczema and asthma). If mum or dad or members in the immediate family have atopy, this increases your child's risk
- Babies who have eczema or allergies are more at risk of developing asthma later on
- Exposure to cigarette smoke either before or after birth.

For more information

Paediatric Emergency Department

Women's and Children's Hospital
72 King William Road
North Adelaide SA 5006
Tel 08 8161 7044
Fax 08 8161 6750
<http://www.wch.sa.gov.au>

Non-English speaking: for information in languages other than English, call the interpreting and Translating Centre and ask them to call Department of Health. This service is available at no cost to you, contact (08) 8226 1990.

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When should I see the doctor?

- The breathing is fast or irregular
- Your child refuses food or drink or is drinking less than half their normal volumes Your child seems tired, pale or sweaty
- Your the child has blue/pale or grey episodes
- Any signs are worrying you.