

EARLY INTERVENTION SERIES



COMMON ILLNESSES IN CHILDHOOD



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COMMON ILLNESSES

There are few common illnesses which occur more frequently in children. They may be caused either by viruses or bacteria. They may present with fever, cold, running nose and may be associated with skin rashes. Some of the common illnesses are discussed below such as, fever, common cold, diarrhoea, ear infection, measles, chicken pox, whooping cough, tetanus and polio.

I. FEVER



Increase in normal body temperature. High temperature can lead to loss of body fluids (dehydration). Children with high fever are usually irritable and cry a lot. Some of them may have fits during high fever.

So

1. Keep the baby cool.
2. Adequately covered.
3. Sponging of the body if temperature rises above 100°F.
4. Plenty of fluids and energy foods.
5. Consult a doctor.
6. Indiscriminate use of medicines at home should be avoided.



2. COMMON COLD

It is usually self limiting. The common features are

- a. Watery eyes
- b. Running nose.
- c. Irritating cough.
- d. Fever

It is usually self limiting. The common features are

- 1. Fever is persisting more than 2 days.
- 2. Chest retraction
- 3. Fast breathing
- 4. Sick look
- 5. Not accepting food
- 6. No improvement with routine treatment
- 7. Repeated vomitings.

3. DIARRHOEA (Loose Motions)

It is a condition when frequency of motion is increased and consistency of stool is loose and watery.

Consult a doctor as early as possible.

Care at Home

1. Give plenty of fluids. Eg. ORS
ORS (Oral Rehydrating Solution) is a special fluid which is given during Diarrhoea. It can be prepared at home by mixing 3 finger pinch of salt and one small close fistful of sugar in a half-a-litre of boiled and cooled water. Commercial preparation of ORS is also available in the market.
2. Continue breast feeding
3. During recovery, give one extra meal everyday for at least one week.
4. Keep the home clean.



5. Prevent diarrrhosa by:

- a. Breast feeding**
- b. Immunization**
- c. Using Latrines**
- d. Keeping food and water clean and covered**
- e. Washing hands before handling foods.**





4. EAR INFECTION (Otitis Media)

Chronic discharge through ears can causes deafness. The discharge can be watery, pus, blood or foul smelling.

1. The discharge from the ear should be wiped out with a cotton wick or a tissue paper roll.
2. Do not use any sharp objects.
3. Dry ear heals fast.
4. Never put oil in the ear.
5. Consult a doctor



5. MEASLES

This disease is caused by a virus. It lasts for one week. Measles rash is blotchy red in colour. It appears on 5th day of fever. The measles rash first appears behind the ear then spreads to whole body. The rash may appear along with skin in his eyes and intestines. Child also suffers from cough, cold, watering through eyes.

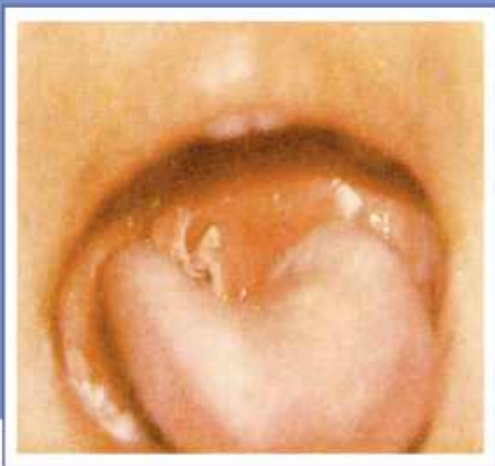
Mother must continue to breast feed the child if the child is breast feeds.

Child should be given more fluids and energy foods.

Consult a doctor if child has

- a. fast breathing
- b. sunken eyes
- c. bleeding rash
- d. unconsciousness
- e. convulsions
- f. ear discharge
- g. vomiting

Till the rash disappears, let the child be indoors. Otherwise he may infect other children and as his protective power is low he may catch infections easily



6. DIPHTHERIA

In Diphtheria the child has fever, sore throat and looks very ill. It may be associated with difficulty in swallowing, refusal of feeds and vomiting. In severe cases white patches on the tonsils on one or both sides may be observed, which bleeds on scraping.

What to do?

Immediately consult a doctor. Child may need hospitalization in many cases.

What to do?

A dreaded infection like Diphtheria, can be prevented by simple immunization with added booster doses.



7. WHOOPING COUGH

In Diphtheria the child has fever, sore throat and looks very ill. It may be associated with difficulty in swallowing, refusal of feeds and vomiting. In severe cases white patches on the tonsils on one or both sides may be observed, which bleeds on scraping.

What to do?

Immediately take child to a doctor and follow the advice

What to do?

By immunizing your child as per immunization schedule.



8. TETNUS

It is broadly classified into two groups

A. NEONATE: First four weeks of life of a new born child.

- I. Baby has difficulty in sucking. Mid stimulus can lead to stiffening of whole abdominal muscles followed by generalized stiffness.

B. OLDER CHILDREN : Onset is slow. These children have local stiffness. Mid stimulus provoke spasms.

What to do?

By immunizing your child as per immunization schedule.

Prevention :

1. Immunize pregnant mother with tetanus toxoid at antenatal visit. Two doses of injection are given between 6 to 8 months of pregnancy.
2. Good umbilical cord care.
3. Wound care under hygienic conditions.
4. Follow routine immunization schedule to your child.



9. CHICKENPOX

In Chickenpox child has fever and within 24 hours of fever, pearl-like lesion appears on trunk. These lesions appear in crops and they are more in trunk and back than on hands and feet. Lesions are highly contagious and itchy in nature.

What to do?

It is a childhood disease and mild in nature. So there is no reason syrup to panic.

1. Paracetamol syrup for fever.
2. Prevent itching by application of lactocalamine lotion and do not allow the child to scratch the lesions.
3. Child to be kept at home till all the vesicles have dried up.
4. Plenty of fluids and energy rich fruits and food to be given to child.



10. POLIOMYELITIS

In Poliomyelitis the disease starts with fever, vomiting and loose motion. There is weakness and paralysis of muscle. Usually large muscle groups of upper and lower limbs are affected. Child may have head drop. It may be associated with breathing difficulty and irritability and sometimes drowsiness.

What to do?

1. Take child immediately to doctor and follow his advice.
2. Strict bed rest and no injections.

Prevention :

1. Immunize your child with five doses of oral polio vaccine as per immunization schedule.
2. Oral polio vaccine added with BCG vaccine to be given at birth.

CONSULT A DOCTOR IF YOUR CHILD HAS

1. Sudden loss of appetite, if it is an alteration of normal pattern.
2. Repeated vomiting especially if it upsets the child.
3. Frequent loose or abnormal motions, or sudden large loose motions.
4. Persistent crying, indicating pain somewhere.
5. Sudden shrieks of pain, even if not repeated in a short while.
6. Difficulty with breathing.
7. Any abnormal discharge especially from ears.
8. Any sudden change in the child's appearance making him look ill.
9. Foreign bodies in mouth, throat, ears, eyes.
10. High fever.
11. Fits.
12. Dull and listless child.

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**Early Intervention to IUGR Children At Risk for
Developmental Delays**