Season Intro and Episode Overview

Hi, welcome to season two of the Baby Manual podcast for parents of toddlers. This season will help you feel confident as you navigate the difficulties of toddlerhood, from tantrums to sleep schedules to potty training.

I'm your host, a pediatrician and mom, Dr. Carol Keim. Hello and welcome to the 10th episode of this season. I'm so excited about this episode because we're going to talk all about supportive care and alternative medicine and other things that you can do besides over-the-counter medications when your child has a cold.

As you know, most children who are less than six years old are not able to take over the counter cold medicines. So we're going to talk about different things that you can do to help your child with all of their symptoms of the cold, and then give you some sample regimens of what to do if they have specific things like flu, COVID, or RSV.

All right. So to start off with, the common cold or, you know, flu or is COVID. They're all respiratory infections and these are all caused by viruses.

Now, the problem with Western medicine and viruses is that we don't have specific treatments for most of those. We do have a treatment now for COVID. There is a specific flu treatment, but most viruses really don' have any specific treatment for them.

And so a lot of times you go to the doctor and your child has a cold and they say you just have to wait it out and that's all. So we have couple of things that can actually do to make them feel better.

Now, a typical viral illness will last 7 to 10 days, and they typically peak around day 3 to 4. So I find a lot of parents coming into the office when their child has had a fever and cough for 3-4 days because it's getting worse and worse at that point.

When to Seek Care for Viral Illness

Now, typically, it will peak and then start to get better after that, but the cough can linger for even two weeks afterwards because of post-nasal drip.

But there are some red flags to watch out for in case your child's illness is not following this course, and this would be without treatment or even with treatment.

So signs of respiratory distress, which means things like nasal flaring or where their nostrils are flared out and they stay flered out the whole time while they're breathing.

retractions, which is the skin pulling in under the ribs or above the collarbones. And when you see that skin sucking in, it makes it look like the bones are kind of sticking out.

Grunting is a sign that a baby is working a little bit harder to keep their lungs open. So grunting sort of sounds like they're moaning a bit. It's kind like, uh, with every single breath.

So if you hear your baby doing that or if see the nasal flaring and the retractions, those are reasons to seek medical care because your maybe might need some oxygen.

The other reason that babies sometimes get hospitalized for colds is if they are dehydrated. So signs of dehydration, it starts off with their lips and tongue looking a little dry.

Their lips might get cracked and decreased urine output, which means peeing less than three times in a day or less then once every six to eight hours while they're awake.

and also being lethargic and really tired. Those are all red flags for dehydration and those would also be reasons to take your baby to the emergency room.

They might need some fluids and they might even need to stay in the hospital for a little bit. Also, if they have fever for five or more days in a row, that can be a sign that they might have something else going on.

Or it could be something like flu, which can have a fever of five to seven days, in row. Which could potentially be treatable. The only problem with flu is that the treatment should be started within 72 hours of starting to get sick.

So if you think your child might have the flu, you should bring them in a little earlier rather than later. But if a child has fever for five days straight or more, that would be another reason to get them checked out.

And then a big red flag is if the fever goes away and then comes back again. So, if it goes a way for a day or two and it comes that often indicates that your child has a secondary infection.

And the place where secondary infections like to hide are in the urinary tract. So urinal tract infections are one of the most common after a cold. In the ear, so ear infections or acute otitis media, which is an infection of middle ear.

The classic ear infection that children get. and pneumonia is the third one. That's where you would be seeing more of those signs of respiratory distress and that fever that's coming back.

So those are the most common ones. Sometimes there are other infections as well. And the reason that children get secondary infections with colds and viral infections is that the viruses can actually attack the white blood cells and cause your white-blood-cell count to go down.

Your white cells are your body's innate response to any infection. They're the ones that fight off any infections. So if your White-Blood cell count is lowered, you're more likely to catch something else.

For fever, We do have something for this. Acetaminophen or paracetamol outside of the U. S. is a medication that is great for fever. It's branded as Tylenol in the United States.

And then also ibuprofen. So ibiprofin is an NSAID or non-steroidal anti-inflammatory drug. The big difference between these two, so they both treat fever and pain, including like body aches, but ibaprofene is also anti inflammatory.

So for some children, this tends to be a little bit stronger and work a bit better, but some don't respond as well to ibuprofen and do better with Tylenol or acetaminophen.

So you can try one or both of those. It is safe for your child to have both in their body at the same time. If you give one of these medicines for fever, give it 20 to 30 minutes to kick in.

But if the fever hasn't come down at all or if it's gone up in that time, you could give the other medication. Just check with your doctor about the dosing because it is dosed based on your baby's weight.

So these medicines also will help with the systemic system, so whole body symptoms, things like body aches I mentioned, and the way body ache manifest in young babies especially is just fussiness or being clingy, or sometimes it manifests as a lack of energy or lack appetite or trouble sleeping.

So the acetaminophen and ibuprofen can help with those types of symptoms. So I typically recommend for parents, you don't necessarily have to treat a specific number because fever is not dangerous until it gets over 106 degrees.

And so I say when it get to 105, I usually would treat it regardless with one of these medicines. But if your baby looks really uncomfortable or they're not playing, they are not eating, and you have a toddler that's just lying around, moaning on the couch, Sometimes just the acetaminophen or ibuprofen will be enough to make them feel significantly better.

Fever Relief and Cooling Strategies

So those are times to treat them if they feel uncomfortable because of the fever. Also, if their feeling uncomfortable and they don't have a fever, you can still give these medicines too because they do help with that discomfort.

Some other alternative things that can help. With fever so I have parents ask me about things like cool baths or external cooling of Yes, it sort of works, but also, so it's sort like when you have a thermostat in your house and you've set the temperature to a certain degree, your heaters will kick on and keep trying to heat up the house, even if you open the windows to cool down the home.

And so what you need to do is you go in and change that thermostat first and then you can open windows and your home will cool. So just like that, the thermostat in your body gets reset by infections and it gets raised to a higher temperature.

So the Tylenol or ibuprofen will bring that temperature down, it will reset that thermostat, but the external cooling will also help to cool their body faster.

So it is okay to do those things. But if you only do the external cooling, if just put them in a lukewarm bath, then their body is going to shiver. They're going feel really uncomfortable.

You might notice that when children are getting a fever, they say they feel cold. And that's because their bodies want to be hotter because it thinks it needs to because that thermostat has been reset.

So if can give that medication first, it's okay cool them externally and that can help bring it down quickly. Another thing from a naturopathic standpoint is called magic socks, where you take cotton socks and they have to be 100% cotton, you know, clean cotton sox.

And I mean, they can have elastic in them too, that's fine. But the cotton sock, so you make them wet with cool water, put them over your child's feet and then cover them with wool socks or some really heavy, warm socks like that.

And you can do that before bed, and a lot of times that can help to break a fever as well. But again, I usually do recommend doing this in conjunction with some medication to make your child feel more comfortable.

I don't recommend things like potatoes or garlic or onions on the feet. I have seen some families do that. All right, so for congestion and ear pain, those are actually related.

And so what happens, the reason that kids get earpain a lot of times with colds and when they get stuffy, and also even after allergies, you get that swelling up in that area.

The eustachian tubes from the ears are the tubes that drain the fluid out of that middle ear to clear it out. They empty at the back of the nasopharynx, which is where the nose and the mouth come together at So any congestion in the head, especially in nose and throat, can swell up and pinch off those little tubes and not let them drain as easily.

And so the fluid builds up, and the buildup of fluid is actually what causes the pressure and pain in an ear infection. When you have something like a bacterial infection causing an ear infection, it usually gets in through the nose or throat and then kind of creeps up those eustachian tubes and infects in there and it gets swollen and stuck in their as well.

So even if your child has a bacteria ear infections, all the antibiotics are going to do is sterilize that fluid but they're not going make the pain go away.

You have to wait until the infection and the inflammation have gone down and those tubes can drain. in order for them to actually feel better. And so it can take 24 to 48 hours after starting antibiotics for a child to feel with an ear

infection.

If they have a viral infection, a lot of times that will cause buildup on both sides. So if both ears are hurting, almost all of the time in children that is because of a virus infection and so decongestants will help because what they do is they bring down the swelling in that whole area in the head and they allow those tubes to open up again and to drain down.

So for children who are six and over, I'm going to mention this just because I know a lot of parents also get sick when their children do, and there is something more that you guys can do.

For six-and-over, you can take pseudoephedrine, which is name brand Sudafed in the United States. That's one that we have to get from the pharmacist specifically.

Even though it's available without a prescription, You still have ask the pharmacy for it and show your driver's license to because it's regulated. And the other one is oxymetazoline nose spray, which is branded as Afrin in the United States.

Congestion and Ear Pain Remedies

Both of those, both the Sudafed and Afrine, they last 12 hours and they're fairly powerful decongestants, but they can cause rebound congestion if you use them too much.

So they could only be used for two or three days at a time. If you used them more than three What they're doing is they are causing your blood vessels to constrict and not leak out as much fluid into the space, into cells around it, which is where that smelling comes from.

The blood vessel stops responding and then they get even worse and even leakier. So you get much more congestion. Try not to use those for too long. There are also some antihistamines with decongestants in them that we have in the United States, things like Claritin D.

And the decONGESTANT in those also, it can cause rebound. So you might notice if you're taking too much of that specific one, not regular Claritan, the ClarITIN D, or other decONGESTANTS with a D at the end, those can caused that rebound congestion.

Just two to three days for those. But for children under age six, we can't do any of these over-the-counter decongestants. Ibuprofen is anti-inflammatory, as I mentioned, and so that's actually the first treatment for ear infections in children is ibupropen for 48 hours.

And that is because sometimes ear infection goes away within 48-hours. So that can help your child to avoid antibiotics, which there are many pros to avoiding antibiotics including things like, you know, GI upset from them and resistance and things like that.

But also, if they're better in two days with just the ibuprofen, then that's pretty indicative that it was a viral infection and they didn't need those antibiotics.

Other things that will help with congestion and ear pressure, you can do saline nose spray or nose drops in children under age six. And the nose-drops I like especially for infants because you know, they can lay them on their back when you're changing their diaper and just put a drop right under their nose.

Babies who are less than a year old, are obligate nose breathers, which means that they have to breathe through their nose unless they're crying. And so they will just suck those little drops right into their nos and it'll start to work immediately.

Now, if you use hypertonic saline, that's not normal salin, but it's a more concentrated saling, That's gonna work a little bit better as a decongestant than regular sali.

But regular sailing is fine too. If they've got a lot of mucus too, the salines can help to thin it out so that it can swallow it. Now, with the saline nose spray and nose drops, also, you know, sinus washes for kids that are old enough to tolerate that, and for adults, what they're doing is washing out all the infection that's in there, clearing the nasal passages, making it a little bit easier to breathe.

they're meant to be for comfort. So if your child gets more upset from this, you don't need to keep doing it. And that's the same for all of these treatments, really.

If any of the supportive care is not making them better, or it's making then feel worse, then don' do it, because that' the whole point of supportive car, right?

Is to make them feel better. Now you can bulb suck out the saline if you wanted to, or you could just let them swallow it because the nose, you know, goes to the back of the throat and then they can just drain that mucus right down their throat, and they could swallow and that's totally fine.

So yeah, with bulb sucking, if it seems to be helping them and clearing that mucous out, that is great, but it is totally optional. Other things with congestion, ginger is a great decongestant.

I love ginger tea for children. For babies who are between six months and a year, it is okay to give them ginger, tea as much as they want to drink of it.

for babies less than six month, they should be exclusively breastfeeding or formula feeding or both. So if you give any liquids that are not breast milk or Formula, you're depriving them of things like calories from fat and protein and carbohydrates.

The idea for children less than six months of age is you can give them just a little bit of tea, like a spoonful at a time, no more than an ounce or two in a day because you don't want to fill them up from that because they can get calorie depleted from it.

Spicy foods for kids old enough to eat them, spicy foods are great decongestant. If you've ever had something really spicy, especially like wasabi, you know, it just opens your sinuses right up.

I like spicy soups as well if kids will eat those. Steam is good. It works just like saline. it waters out and helps thin out those secretions in the sinus, makes them clear out a little better.

And then things like Vicks or eucalyptus oil, peppermint oil. Any of those menthol type of oils. There's some breathe blends from different oil companies.

So any of those that smell like that can help open them up as well. With the oils, I suggest putting them for children a year and up. You can put them on their chest and on there feet.

For younger babies, you could put those oils or that Vicks either on the bedsheets or on pajamas. or on their socks before putting them on so that you don't sting their skin, because they can be pretty sensitive to this.

And that works for older kids as well, if they are sensitive. You can even put it on the pillow for the older, older old kids. From an OMT, which is an osteopathic manipulative technique, or a chiropractic standpoint, you can do a sinus drainage massage.

The way to do that is you tap on sinuses and then press outwards, so the sinus are between the eyes, just above, like in the middle of the forehead. and underneath both of the eyes, like next to the nose, kind of by the cheeks.

So those spots, if you tap on those and then press outwards, from the middle of face to outside of a face, massage in that direction. And then turn their head to side and massage down the side of their neck.

Then turn the head on the other side, and the massage on other sides of neck and that can help to get some of that

fluid to clear out of their head. The sides of the neck is where the lymphatic channels are that drain the face, and so those will help drain any of those fluid out there.

Acupuncture can also help with congestion and ear pain and acupuncture in children does not involve needles. So for young children, what they do is they have special tools.

Some of them are triangle shaped, some are shaped like little brushes, and they just gently tap or stroke or press along different acupunture points and channels and that can help.

It's one of those things that, from a Western standpoint, we can't explain why it works, but we know that acupuncture does work. So it is a good suggestion for those kids that are congested and you don't know what else to do.

And then also onion earmuffs is another naturopathic suggestion for ear pain specifically. So to make onion, ear muffs, what you do is you slice an onion.

You can either cut it in half or into slices and warm it up. Be very careful warming it, but you can pour boiling water over it and then pour it back off and feel if it's warm, or you could put it into the microwave for just a few seconds.

Make sure you touch it because you don't want to burn your child. The onions get very hot. So you want it to just be warm or hot enough that it's not going to burn and that's going be uncomfortable for them, but fairly warm.

And then just put that onion right over their ear, just like an ear muff, and have them lay like that for as long as they can tolerate. Typically 20 to 30 minutes should be good.

That's one of those other naturopathic things that I kept hearing about. I tried it with my own daughter and it did work. So I know that that is a very small sample size right there, It's something that could be worth trying and most people have onions at home.

So again, just be careful not to bring your baby. For runny nose. So first off, I just want to say antihistamines do not work for runny nose. They don't work.

For congestion, they work great for allergies, but histamine is not being released when you have a viral infection. So when. You have an infection, antishistamine are not going to help with the congestion or the running nose, then a drill is.

Not going. To try out your kids. It's a diphenhydramine. Um, it doesn't. Work that way. Unfortunately. But if they do have allergies that can't help. With that.

So for a runny nose, I would say use saline nose spray or nose washes to keep that mucus cleared out. And then you can use the bulb sucker if the boogers are stuck in there.

Make sure you're washing your hands every time you wipe your child's nose with soap and water. Wash your hand with water because you could get that infection pretty easily.

There's a lot of viruses that come out in the mucous when children have a running nose. And a lot of parents will ask me about the color of the mucus, and they'll tell me, well, it was clear, now it's yellow, or now, green.

And that doesn't necessarily mean that they need antibiotics if the mucous has changed colors or if it has gotten thicker. The colors are actually from red blood cells that are being broken down.

So whenever you have inflammation and the blood vessels are leaky, all of them are leaking out into that area, too, along with that fluid. When the red cells break down, they turn yellow and green, Just sort of, if you've ever had a bruise that changed colors, you know, it goes from purple to kind of green to yellow, and then it fades away.

It's the same sort process. Those red blood cells breaking down. So the color of the mucus isn't the infection. It's not bacteria making it colored. it's the amount of inflammation.

Now, bacterial infections do tend to cause more inflammation than viral infections. So it is more likely to have colored mucous with bacterial infection and viral, but it possible to it with both.

So if your child's mucus seems to be really thick and stuck, you can use a medicine called glyphenazine, which is branded as mucinex in the United States.

Plain muce-ine-ex, not with anything else mixed in with it. But the way that glyfenazin works is it's an expectorant, Which means it makes you cough and spit out stuff.

It makes your secrete thinner mucuss, and then it make your body want to cough it out. So most of the time, children do not need this medication.

Runny Nose and Cough Support

They almost never need it, really. It's just if they have very, very thick mucus, that seems to be stuck. But I feel like a lot of parents give their children mucinex because it's branded as a cough medicine here in the United States.

And unfortunately, it is not an anti-cough medicine. cough medicine that makes you cough more. And I have a lot of parents tell me that, you know, they gave the mucinex to their kid and it made them worse or they're giving them this cough, medicine every day and they still have this.

So when I find out that it's that medicine, I tell them that's what's actually causing the cough at this point. It's not the infection anymore. Remember, if you do need to clear things out, or as an adult, If you have sinus infection, and you've got that thick, stuck mucus, You can use that goifenazin or muccinext to clean that out.

All right, as for cough, there are some cough medicines that we have in the United States, but they are only for ages six and up because all of them, things like dextromethorphine, codeine and other similar ones, what they do is they make you not breathe as deeply and they decrease the respiratory drive.

So they increase your desire to take deep breaths. For children less than age six, this can actually cause them to stop breathing. That's why we do not recommend any cough suppressants in children under age 6. Again, antihistamines will only work for a cough if it's allergies and not an infectious cough.

So those aren't going to help either. And unfortunately, ibuprofen and acetaminophen also do not do anything for coughs. The only thing in Western medicine that has been shown to be safe and effective in children is honey.

Honey is only good for children over a year because, remember, children less than one year are at risk of getting botulism from honey, which is a deadly disease.

But over a year of age, it is safe to give honey to children. And for children less than a-year, we do sometimes suggest that you give them agave syrup.

It's not as good as honey. it hasn't been shown in studies to be as effective, but it's something that might help a little bit with their symptoms. You know how honey kind of coats your throat, can make it feel a bit better?

Agave is the same sort of idea. So you can try that, but unfortunately for children who are less than a year, for the cough specifically, there's almost nothing that we can do.

We can't do those other things like the Vicks and the essential oils and things, like acupuncture and chiropractic can help with that as well. But those are, of course, not Western treatments.

Those are the alternative ones. You can also teach your children, and you should teach you children to cough or

sneeze into their elbow if they need to.

Because you remember, if you sneeze or cough into your hands, all of the germs go right onto your hand. And you know how children are about washing their hands.

Especially right after coughing. They just want to get back to whatever they're doing. So if coughs into the elbow, it keeps it covered and they are less likely to put those viruses onto surfaces and infect other people that are in the family.

There are some immune boosters that you can use as well. And these are things that are going to, like antioxidants and things, that naturally antiviral that can help you fight infections.

So these actually, I do have a link on my website, my link tree that will be linked in the show notes for this, where you could just find some easy regimens and some you know, samples, ideas of what you can get, but any vitamins really are, I'd say overall in the United States at least, most vitamins are fairly equal.

So any vitamin D, C, etc. will work. Vitamin D every person from birth to adult should have 400 units of vitamin d per day, and that's just a minimum amount.

When you're sick, you can double that and it is safe to take more vitamin D. There are not currently any cases in literature of anyone overdosing on vitamin d.

You can overdose on other vitamins. Vitamin D specifically is one that we suggest taking at least 400 units per day. If you want to double it while you are sick I think that's great.

Vitamin C, now this is one you can overdose on. So it's a thousand milligrams for adults is the daily dose. The way I calculate it for children is a hundred milligrams, for each 10 pounds or five kilos of weight.

That's for a one-year-old child who is approximately 21, 22 pounds, or 10 kilos, that would be about 200 milligrams of vitamin C. For zinc, the adult dose is 30 to 60 milligrams for adults.

And so you want to do, again, about one-tenth of that for children. So three to six milligrams per 10 pounds of weight for zinc. For echinacea, This is one that's not specifically dosed, but that is an herb that can help stimulate your immune system.

So when you are first exposed or you first start getting symptoms, like the first day or two of symptoms. You can do some echinacea and that going to trigger extra inflammation, But it triggers it in a way that it helps to fight the infection off.

It just boosts your immunity in that sense. Elderberries are shown to be antiviral as well and immune boosting and high in vitamin C. So you can give them elderberry syrup or gummies and most children love those.

They taste really good. Garlic is something also that can boost your immunity. A lot of children do not like garlic and garlic can be pretty spicy when it's fresh.

And so the spiciness of it can actually help with congestion, but garlic is one of those that if your child is willing to eat it and as an adult you even swallow garlic pills, they have garlic oil pills that you can buy that can help to boost your immunity.

Tea with honey, lemon, and ginger is one of my favorite things when I'm sick and for kids a year and up as well. The honey has for the cough suppression and coat the throat, the ginger as a decongestant, ginger also settles your stomach.

So when kids are swallowing mucus, sometimes they will throw up from that, or if they cough a lot and then they throw, up the, um, that ginger can help to prevent that.

And the lemon juice is for vitamin C. so honey lemon ginger tea is, is my one favorite thing. Again, one and up. Use agave if they're less than a year in that just to make it sweeter because it's pretty bitter if you don't have anything sweet in it.

And then you want to try to decrease sugar and dairy when your child is sick. This does not apply for children who are exclusively breast or bottle feeding because those, you know, children less then six months need that milk to survive.

But after six months of age, from six to 12 months, they are still relying on breast milk or formula for some of their nutrition. If you're breastfeeding, definitely keep breast feeding while they're sick.

if you are giving formula, it is okay to keep giving some formula because they need that nutrition, but I'd say try to cut back a little bit if can, and also offer some water with foods when they say, make sure they get lots of fruits and vegetables.

Now, children and adults as well, we should be having five servings of fruit or vegetables at least per day, and that's just to maintain health. And a serving is the size of your own fist.

So if you take a whole fistful of whatever it is you're eating, if imagine like spinach, you can really crunch it down small. When you are grabbing it, other things like apples are pretty solid.

A fist full amount of vegetables or fruits is one serving. When you're sick, you want to be doing 10 servings per day, if you can. And that will keep your antioxidant levels up super high and help your body repair as it's healing.

So 10-servings is an awful lot. That means at least half to three quarters of every meal needs to fruit or vegetables.

Immune Support and Nutrition

If you are not able to eat that many, I do have a link as well for some fruit and vegetable supplements that are just whole fruits and vegetables that have been freeze-dried, powdered, and put into capsules and gummies for adults and children.

I take those. I make my family take all take, those as well. But I love fruits and veggies. And if you can get regular, fresh fruits, and vegetables, that's wonderful.

If you cant, supplements can work as, well in that same sort of way. All of these vitamins, as I said, they're, in the show notes in my link tree, which is l-a-n-k-t-r dot e-e slash dr-kyme, D-R-K-E-I-M.

Now, if you do purchase any of the supplements through MyLinkTree, I like to be upfront that I do get a commission for that, but also you get them at a discount.

So it is a win-win. All right, so some sample regimens real quick. If your child has RSV and or the common cold, you can do these sorts of things. Remember that RSV is one of the common cold viruses and it gets a lot of attention here because about 1% of children with RSv who are less than two years old will end up hospitalized because of it and about 10% will have to see the doctor because they seem so sick from it.

So RSV is something that as you get older, there are many subtypes of it, many strains of. And so we don't have a vaccine for it specifically. It's not just one respiratory syncytial virus, it's many RS V's sub types.

So you can get reinfected and each time you. Get it and fight it off, your body gets a little bit stronger. So some of the treatments for children and adults with RSV are common cold, Tylenol and ibuprofen.

As I've mentioned, the acetaminophen is every four hours and Ibupropan is ever six hours. Saline nose spray or nose drops each time they're about to eat and go to bed.

can really help clear that nose out. And especially babies who are less than a year, that's what we do in the hospital, is we the saline nose drops every time they're about to eat and before sleeping.

Unfortunately, it's one of the best treatments that we actually have for RSV. You can bulb suck if you want to get that mucus out or not, again, just for comfort.

You could bring them into the bathroom when you're showering and they can get the steam from there. And if put some Vicks or one of those essential oils on yourself or on the shower floor before you get in, that will help it get up into that steam and help your baby breathe that in as well.

You can use a nighttime humidifier if you live in a dry climate. You don't necessarily have to buy one, though, if don' have one. It's one of those, you know, If you've got one already and you're in the dry, climate you can do that at night.

I don''t suggest leaving a humidify running all the time though because it can grow mold and mold can cause worse respiratory symptoms and can even potentially be a precursor to asthma.

So we want to be careful with the humidifier. And if you're in a moist climate, you don't need it really at all. You can give vitamin C and D, zinc, echinacea, elderberry, and then also consider chiropractic and acupuncture.

Make sure your baby stays really hydrated because the two reasons that children end up hospitalized with RSV is either that they need oxygen or they needed to hydrated, because they're not able to drink.

When babies less than a year, like I said, are obligate nose breathers, when they get a stuffy nose, it's really, really hard for them to breathe and very hard to eat.

It's almost impossible to swallow when your nose is all the way stuffed. So babies who have RSV tend to have problems with eating and do tend get dehydrated.

Now, it's fine if they don't eat anything solid for days. So this applies for babies, for children. It's okay if you're not eating anything as long as they are drinking.

And they need to be drinking at least some water and then consuming atleast a little bit of sugar and salt with it every day. Even just like a cracker here and there is fine for older kids.

For younger kids, breast milk formula, they have all of that in it. So as long as they're drinking water and consuming something with a little bit of sugar or salt in, that's enough to keep them going even for several days.

If you're breastfeeding and your baby is sick, definitely keep breast feeding, even if you are sick as well. If your sick and you baby's not sick in your breast-feeding, then I suggest putting a mask on while you feed your babies, just so you not coughing and sneezing and breathing directly onto them that whole time, because then they probably will catch it.

But if your baby is sick and you're breastfeeding, you can take immune boosters like the vitamin C, vitamin D, zinc, echinacea, elderberry, garlic, and those will pass into your breast milk and your Baby will consume them.

So they can actually help boost your babies immunity as well. And they help prevent you from getting sick if you are not already. I recommend that for breast feeding moms.

One really important thing to remember with RSV causing mild colds in older kids is that if you have another child in the house that's in school or daycare, and they have just a little bit of runny nose, that is the story I hear almost every time with young babies that end up hospitalized with R. S. V.

There is a kid that came around to them, maybe it was a cousin, a friend. someone else that was being babysat at the same time. And they just had the tiniest cold, just a little bit of a runny nose, you know, and then suddenly baby

ends up super sick.

So that is kind of what RSV looks like in bigger kids. It's just very mild cold. Anyone with any cold symptoms at all should not be in the room as your baby unless you're the mom that's feeding them.

Anyone who is in the same room, they should ideally be sitting across the room at least six to 10 feet away. And ideally can have a mask on as well, because you know, masks will help to prevent any sneezes or coughs from traveling quite so far.

Make sure that if you have an older child who is sick, you're not sharing bulb suckers or pacifiers between your children. Because I've also seen children end up hospitalized for that reason where, the older was congested and so the mom used the bulb sucker to get out the nose.

And then the little infant had the normal. infant stuff he knows like they do when they're first born, you know, when their little and use that same bulb sucker and then give it to that baby.

So I've seen that happen actually a couple times. Um, so make sure you're not sharing bulb suckers, pacifiers, and you, know if children put any toys in their mouth, especially the older ones if they are a little bit sick, make you wash those toys off before letting babies touch those as well.

Sample Care Plans for RSV, COVID, and Flu

For COVID, it's the same supportive care regimen as RSV, but there may also be some specific treatment for it in the future for children. As of right now, we do have a treatment or adults for COVID but the treatment that medication is not yet approved for Children.

So keep your eyes peeled for that. It hopefully will come out soon, that we don't know for sure. And for COVID as well, we do have a vaccine for that.

So the adults in the household, if they are vaccinated for Covid, they're much less likely to bring it home to their children and give it to them. We do recommend that the adult in household get vaccinated.

For the flu, so similar, but a little bit different. With flu a lot of times they also have some GI upset with it. Flu tends to hit the respiratory system and the gastrointestinal system.

And so it causes things like cough and vomiting and diarrhea and fever and body aches and all those things. So we do the acetaminophen or ibuprofen for the fever in bodyaches.

Also can help with their sleep and their appetite. saline nose drops or nose spray for congestion, honey for cough if they're over a year, and ginger for digestion and also to settle their stomach.

For vomiting and diarrhea, you want to be making sure that they stay hydrated. That is the most important thing with vomiting in diarrhea. So you wanna give them very small amounts at a time.

If you give a sick child a whole cup of water and they chug that whole thing, they'll probably just gonna throw it right back up. And so giving them tiny little bits at a time can really help, even with a syringe if you need to.

You can also give them watered down juice. Make sure it's at least 50% water when you water it down, because if it is higher than that, it will not hydrate them as well.

Or you can use oral rehydration solution, which is very easy to Google. It's basically just water with sugar and salt in it. You can also try sneaky things like popsicles.

Popsicles count as hydration because they're just liquid, right? And a lot of children love them. So you can make your own popsicle. You give them ice chips to suck on if they like it.

Can also do gelatin like jello. Most children loved that and that is mostly water. And so that counts actually as a liquid. Then we do have commercial drinks like Gatorade or Pedialyte and those are okay as well.

I don't Technically, I don't necessarily prefer them over things like water and watered down juice because some children like them, but some really don' and some it makes them throw up as well because they just don''t like it.

If they're not able to keep down sips of fluid, if they are unable to down water, that's the time when you need to bring them into the emergency room.

And sometimes children, when they get dehydrated, what happens is they got a little bit of acidosis, which means a bit acid in their blood, lactic acid builds up, and that makes them feel more sick and makes throw up more, because the body's trying to get rid of acid, so it tries to remove stomach acid.

So vomiting can become a vicious cycle. When they start to dehydrate, then they vomit more. And I see a lot of kids bounce right back after we give them a bag of IV fluids in the ER.

If your child is at that point where they're throwing up water, definitely bring them in. get them hydrated up. They might need to stay in the hospital, but there's a decent chance that they'll just need We do have some medicines against flu in the U. S.

We use Tamiflu most of the time, which is Oseltamivir. And it's sort of a double-edged sword, that one. So I feel like what I found is that for some people, it makes them feel better immediately.

Like first dose, they know, and they feel good already. It's a five-day course of medication. You take it twice a day. but some it makes them throw up or cause pretty severe diarrhea and stomach aches.

So with Tamiflu, if you are going to be doing that, it is approved for age six months and up. Just watch your child after you give that first dose. If it make them sick, you don't need to continue it.

They will get better on their own without it, But if they do fine with it, then keep doing it because it will make the infection go away faster. And then adults and children over age six are eligible for the flu vaccine as well.

So that can actually help prevent flu, or if the do get it can help it not be as bad. The way they develop the vaccine every year is they look at the variants that are circulating around the world because the flue tends to migrate around.

It's kind of interesting. goes around about once a year and as it comes back, it has mutated. And so we check the variants that are out and circulating and put as many antigens as we can that would protect against those variants into the vaccine.

So some years it's really good. Some years, It's not as effective. Sometimes it mutates differently than we expected. But regardless, getting a flu vaccine can reduce your risk of getting flu and getting seriously ill from the flu by at least 20 to 50%. So all of this information I'm really excited to share with you is going to be in a new book that I am writing.

It is called The Holistic Mama's Handbook, and I've been collaborating with some chiropractors, acupuncturists, essential oils people, massage therapists, nutritionists.

just to find all of the information I can for you guys about things to help your young child who's less than three.

Book Announcement and Season Wrap-Up

Because really, from a Western standpoint, there's not too much that we can do, really. It's the acetaminophen ibuprofen you keep hearing over and over again and saline drops is a lot of our mainstay for infections in children and for these comfort measures and quality of life.

So I have done a little bit of studying myself in some alternative practices, and I'm really excited to write this book with these other specialists because they're just brilliant.

And I read all of the research that they give me as well, but then I do my own. When I say I am doing research, what I really mean is a literature review, I go through the scientific literature, looking at scholarly articles, reading the journal articles and pulling out the information that is actually useful.

and that really would apply to your child. There are a lot of studies out there that are just poorly conducted or don't have a big enough sample size or doesn't necessarily apply because of whatever the conditions of the study were.

So I'm really critically analyzing all of this stuff to really help you guys and to not give you any misleading information. So I'm planning to release this book in the fall of 2023. So keep your eyes peeled for that.

And in meantime, our next season of the Baby Manual podcast is going to be all about this. All about the holistic and supportive care and alternative medicine that you can do to help your babies when they're sick.

So thank you so much for joining me this season and I look forward to seeing you next season. Thank you for listening to the Baby Manual Podcast. Please hit that subscribe button below so you don't miss the new episodes as they come out.

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