

Wheezing disorders in the preschool child - pathophysiology and management

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- Respiratory Tract Diseases -- therapy -- Infant
- Respiratory Tract Diseases -- therapy -- Child, Preschool
- Respiratory Sounds -- physiopathology -- Infant
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- Wheezing disorders in the preschool child - pathophysiology and management
- Wheezing disorders in the preschool child - pathophysiology and management

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Wheezing in Children Younger than 3: Differential Diagnosis and Initial Approach to Management

Eid NS, Shepherd RN, Thomson MA. Children may have recurrent symptoms or nonresolution of pneumonia as a result of obstructive atelectasis. If your doctor determines bronchitis is causing your wheezing, you may be prescribed a bronchodilator such as albuterol Proair® HFA, Proventil® HFA, Ventolin® HFA or an antibiotic to heal a bacterial infection.

Managing wheeze in preschool children: How difficult can it be?

C , Chest radiography should be performed in children with recurrent wheezing or a single episode of unexplained wheezing that does not respond to bronchodilators.

The Diagnosis of Wheezing in Children

Other expert-driven attempts to distinguish phenotypes of wheeze have mainly been based on long-term temporal patterns early transient, persistent and late onset wheeze , or main triggers viral wheeze, multiple-trigger wheeze , .. ED physicians are experts at differentiating the expected from the unusual, and this skill is important when evaluating the young child with first-time, persistent, or protracted wheezing. Additionally, the mAPI also specified allergic sensitization to 1? For instance, wheeze occurring only during viral infections may be due to structurally narrow airways.

Wheezing Disorders in the Pre

The most significant risk factors seem to be eczema in the patient or asthma in a parent; other risk factors and associations include allergic rhinitis in the first year of life, close family members with other atopic disease, recurrence of wheezing without an associated URI, perinatal passive smoke exposure, eosinophilia greater than 4%, elevated serum IgE level at 9 months of age, and positive allergy skin testing.

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