Management of Acute Wheeze in a Paediatric Emergency Department

S. Kyne¹, S. Donohue¹, E. Ryan¹

Department of Paediatrics, University Hospital Galway, Ireland

Dear Sir,

Respiratory symptoms in children are very common with almost a third of children aged 1 to 5 years experiencing recurrent cough, wheeze or shortness of breath during winter months¹.

While wheeze is a common presentation to primary care and Emergency Departments (ED); there is a tendency to over-use nebulised short-acting-beta-agonists for cases of wheeze, despite many studies showing equal efficacy of inhaled forms². 

We decided to carry out a retrospective analysis of patients under the age of 14 years presenting to the ED in University Hospital Galway (UHG) with complaints of “wheeze” or “cough” on triage between the 1st July and 18th of September 2017 (Audit Period 1). There were 114 cases in total and these notes were compared against current UHG guidelines. Records were examined to see how many of these patients had a wheeze on presentation, the severity of the wheeze and subsequently the management of the wheeze in the acute setting. To fulfil criteria of compliance; patients must have been started on the appropriate medication, care must have been appropriately escalated and patients subsequently discharged home with an asthma action plan.

A teaching session was then carried out on the 14th of November 2017 showing results from the original audit along with re-education of the guidelines. The management of acute wheeze was then re-audited looking at a period from the 20th of November to the 31st of December, where 204 patient charts were examined for compliance (Audit period 2).

In summary, this closed loop audit looked at the management of acute wheeze, a common Paediatric ED complaint¹. We see that there was an improvement in Period 2 which shows the benefit of Paediatric NCHD teaching sessions. Like every hospital group in Ireland, however, the annual change of NCHD staff happens every July and January. Many of these staff are new to schemes, may be new to Paediatrics and many have not worked in a Paediatric ED or be aware of current best practice. Therefore, it is essential to have ongoing staff education and teaching sessions to ensure that guidelines are adhered to and patient care optimised not only in UHG but also in Paediatric centres.
around the country.

**Corresponding Author:**
Sarah Kyne  
University Hospital Galway,  
Galway, Ireland  
Email: kynes@tcd.ie  
Telephone: (091) 524222

**References**

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