Flu in Children Treatment

Self-Care at Home

Flu symptoms may last more than a week. Caregivers can relieve and soothe children's aches and pains with basic home care.

- Rest in bed.
- Allow the child to drink lots of fluids of the child's choice.
- Treat fever with acetaminophen (Children's Tylenol, Infant's Feverall, Junior Strength Panadol) or ibuprofen (Children's Advil, Children's Motrin) taken according to package instructions or consult the child's doctor (do not give aspirin because it poses a risk of causing Reye syndrome).
- Use a humidifier in the child's room to make dry air easier to breathe.
- Children may need more careful attention for these symptoms.

  o Runny nose: Younger infants usually breathe through their nose and cannot breathe through the mouth. Even older children have difficulty breathing through the mouth and sucking on something at the same time. Therefore, it is very important that the child's nose should be clean before feeding and before putting the child to sleep.

  o Suctioning is the method to clean the nose. For younger infants, use a rubber suction bulb to remove the secretions gently. Older children can blow their noses, but forceful blowing can push the secretions into the ear tubes or sinuses. Encourage the use of tissues and gentle nose blowing.

  o Dry or stuffy nose: It is important to remember that most stuffy noses are blocked by dry mucus. Blowing or sniffing alone cannot remove dry mucus. Use of saline nosedrops is helpful in loosening the mucus. These nosedrops are available at most drug stores. One minute after using the nosedrops, use a soft rubber suction bulb to gently suck out the loosened mucus.

Medical Treatment

Treating symptoms is the cornerstone of managing the flu in children. Home care methods most recommended include rest, drinking adequate amounts of fluids, control
of fever and body aches with nonprescription medication, and maintaining comfortable breathing by means of humidified air in the child’s sleeping area.

Four influenza antiviral drugs are currently licensed in the U.S. If given within the first 48 hours, antiviral agents decrease the severity and duration of symptoms, but their ability to prevent complications of influenza A has not been established. The primary drawback of these types of medications is that resistant viruses can slow recovery.

- M2 inhibitors include the drugs amantadine (Symmetrel and Symadine) and rimantadine (Flumadine). Either can be used in the prevention and treatment of influenza type A. Amantadine and rimantadine are not recommended by the CDC for the 2006 influenza season. Laboratory testing by the CDC on the predominant strain of influenza (H3N2) currently circulating in the U.S. shows that it is resistant to amantadine and rimantadine. Antiviral agents are not effective against influenza B and are not approved for use in children younger than 1 year.

- Neuraminidase inhibitors (NAIs) are FDA-approved for uncomplicated influenza when the symptoms have been present for fewer than 48 hours. The main advantages of the NAIs are their activity against both influenza A and B. Zanamivir (Relenza) is approved for treatment in children 7 years and older. Relenza is approved to help prevent influenzae in children 5 years and older. The drug is available as topical powder administered by a breath-activated inhalation device. Oseltamivir (Tamiflu) is approved for prevention and treatment of flu for children older than 1 year. It is available as a tablet and suspension and is usually taken for 5 days.

- Side effects: The use of amantadine has been associated with central nervous system side effects including headache, insomnia, confusion, and failure to concentrate. In addition, the risk of seizure activity during therapy with amantadine in people with known seizure disorders is increased, even if they use medications to counteract that side effect. These side effects go away when a person stops taking the drug. Gastrointestinal side effects, such as nausea and loss of appetite, occur in 3% of people taking them. The most common side effects of Relenza and Tamiflu are nausea, vomiting, and diarrhea.
For more information, read the complete article, Flu in Children

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