



Patient Education:

Repeated Infections in Children

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description	Learn why your child may get several infections while he or she is still young.
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Overview

How common are repeated infections in children?

Babies are born with immature immune systems. As a result, babies tend to get a high number of infections, usually 1 every 1 to 2 months. Babies' immune systems begin to mature soon after birth. The number of infections begins to go down with time. By the time children are school-age, their rate of infection is usually the same as the rate for adults.

Why might my doctor be concerned about repeated infections in my child?

Most doctors become concerned if children go from simple viral infections to more complicated and severe bacterial infections, such as blood infections and pneumonia. Unusual infections or an increase in the number of infections over time are other warning signs.

Will my child be okay?

Most children who have repeated infections don't have any serious problems and grow up to be healthy adults. Their infections occur less frequently by the time they reach school-age. Make sure your child gets plenty of sleep and eats [a healthy diet](#). Sleep and proper nutrition

may be just as important as medicine in helping your child fight off infections.

Causes & Risk Factors

What causes some children to have more than the usual number of infections?

Sometimes it's easy to see the cause of an infection, such as being in day-care centers. Children in day-care centers give infections to each other. They drool and their noses drip. They touch each other and touch all the toys. This spreads infections. As adults we have far less contact with each other's germs, so we are less likely to catch so many infections.

Exposure to cigarette smoke (sometimes called "passive smoking") is another cause for runny noses and wheezing in young children. Because more women of childbearing age are smoking, passive smoking is a more common cause of respiratory infection in children. Passive smoking is now linked to infections and asthma in children.

Do specific medical conditions cause repeated infections in children?

Structural changes in the sinuses or the eustachian tubes (connecting tubes in each ear) are a common cause of repeated infections in children. The term "structural changes" refers to differences in the bony parts of the skull, the sinuses and the ears. These differences may be inherited. Some differences in body structure make it easier for that person to get infections because the normal drainage of the eustachian tube (in the ear) or sinuses (in the nose) is blocked. When the drainage is blocked, the number of bacteria grows. This leads to infection. In most children, as the head grows, drainage problems get better. If young children are having too many ear infections, they might need antibiotics or special ear tubes.

Allergy and asthma can also cause repeated [sinusitis](#) (stuffy or drippy nose) and wheezing. Allergy can cause inflammation inside the nose that lasts for a long time. Because of the inflammation, the normal drainage pathways of the nose and sinuses swell and get plugged up. Bacteria grow, causing an infection. Medicine is necessary to treat the cause of the infection, which is the allergy.

Coughing that goes along with mild viral infections may be a sign of [asthma](#). Sometimes when we think children have pneumonia as a complication of a cold, they really have asthma. These children need asthma medicine in addition to other medicine for infection.

What causes children to have really serious repeated infections?

In some cases, the answer is chance alone. In rare cases, an otherwise healthy child will have 2 or 3 severe infections for no obvious reason. However, your doctor may want your child to have some simple screening tests to check if your child has an immune deficiency (a weakness in the immune system). This is the main cause of repeated severe infections.

Prevention

What can I do to prevent repeated infections in my child?

- If you smoke, [stop](#). Until you quit completely, smoke only outside of your home and outside of your car. Smoking in a room away from your child does not help. Air filters also do not help protect your child from secondhand smoke.
- The worst season for colds is the winter. If you have a relative or friend who can take care of your child during the winter, you could move your child out of day care, where so many other children would have colds. Smaller home-care situations (with 5 children or less) would be another good choice. Fewer children in day care means fewer infections to be exposed to.
- If you have a family history of allergies and asthma, you may want to have your doctor check your child for these conditions.

FDA Warning

The U.S. Food and Drug Administration (FDA) advises against the use of ear candles. Ear candles can cause serious injuries and there is no evidence to support their effectiveness. For

more information, please visit the [FDA Web site](#).

Questions to Ask Your Doctor

- It seems like my child is always sick. Is there anything we can do?
- My child gets ear infections regularly. Should he/she have ear tubes?
- What are the dangers of my child's repeated infections?
- Should my child not attend day care?
- Is there anything I can do at home to help my child?
- Are there any medicines my child should take?
- My child coughs and wheezes a lot. Is it possible he/she has asthma?
- Should my child be tested for allergies?
- When should I call my doctor?
- If my child is on antibiotics for repeated infections, could that cause him/her problems?