



## GOORMAAN WALWALAA?

Hagahaaga Qufacyada, dureyada, Dhego-xanuunka iyo Cune xanuunka

**WHEN SHOULD I WORRY?**  
Your guide to Coughs, Colds,  
Earache & Sore Throats

**Warka ku:**  
Information for:

## Buug-yarahsan yaa loogu talagalay?

Haysashada ilmo xanuunsan waxay waalidka ku noqon kartaa xaalad cabsi leh. Haddii aad wax badan ka fahamsan tahay cudurka waxay ku dareensiin kartaa inaad xaalada gacanta ku haysid. Buug-yarahsan waxaa loogu talagalay waalidka (iyo carruurta waaweyn) wuxuuna ka hadlayaa caabuqyada caadiyan ku dhaca carruurta sidooda kale u caafimadka qabta. Loolama jeedo carruurta qabta dhibaato caafimaad oo joogta ah sida neefta, dhibaato dhinaca wadnaha, ama kelyaha ah. Ha u isticmaalin talooinka ku qoran buug-yarahsan carruurta da'doodu ka yar tahay 6 bilood. Carruurta ka yar da'dan waxay caabuqyadu ugu dhici karaan si ka duwan.

### **Waa maxay waxa aad badanaaba ka walbahaarto?**

Haddii aad arkayo GP-gaaga ama kalkaaliye caafimaad, aad bay muhiim u tahay inaad u sheegto waxa aad aalaaba ka walwalsho.

### **Maxaad ka fileysaa la tashiga?**

Marka aad la tashanayo dhaqtar ama kalkaaliye caafimaad, waa fikrad fiican inaad ka fikirto waxa aad filanayso. Haddii aad wax uun fikrad ah ka haysato wixii aad jeelaan lahayd in la qabto, u sheeg dhaqtarka ama kalkaaliyaha caafimaad. Tani waxay iyaga u ogolaanaysaa inay isku dayaan oo ay wax ka qabtaan waxyabaha aad filanaysid.

### **Qandho (Heer-kulka Jirka oo Kaca)**

- Qandho waa jawaab caadi ah taaso xattaa laga yaabo inay caawiso la dagaalanka caabuqyada (infections).
- Qandho ilmahaaga wax ma yeelayso. Heer-kulka oo aad dejiso uma muuqato iney ka hor-tagi suuxdin (bogga xiga fiiri)
- Carruurta ay hayso xummad sarraysa ( $40^{\circ}\text{C}$  ama ka badan) waxa u badan tahay in caabuq daran uu hayo (inkastoo intooda badan uusan hayn). Fiiri bogga 7 si aad u aragto astaamaha kale ee caabuqyada aadka u daran.

### **Maxaad ka samayn kartaa?**

Si aad ilmahaaga raaxaysigiisa u kordhiso, waxaa laga yaabaa inaad damacdid oo isku daydid inaad hoos u dhigto heer-kulkooda adoo siinaya Paracetamol iyo/ama Ibuprofen (waxaad kaloo fiirisaa bogga 6). Ka qaad dharka kore (ha isku dayin inaad daddo ilmahaaga haddii qandho qabato). Isbuunyo biyo lagu qooyey oo la marmariyo way uga sii dari kartaa arrinta waxayna ilmaha geyeysiin kartaa inuu cadhoodo amase uu giriiro (taasoo sii kicin karta heer-kulkooda). Si kastaba ha ahaate, haddii aysan ka cadhaysiinay ilmahaaga, waa laga yaaba in qubeys /isbuunyo biyo qandac ah lagu qooyo ay waxooga caawiyaan.

“... Habeen barkii  
bay qandho,  
mantag, iyo qufac  
aad u duran la soo  
toostay. Waxay  
xaqiiqdii ahayd  
habeen aad  
cabsiyeed u ah...”

#### **Who is this booklet for?**

Having an ill child can be a very scary experience for parents. If you understand more about the illness it can help you to feel more in control. This booklet is for parents (and older children) and deals with common infections in children who are normally healthy. It is not meant for children who have ongoing health problems such as asthma, heart, or kidney problems. You should not rely on the advice in this leaflet for children who are less than 6 months old. Babies younger than this can respond differently to infections.

#### **What is it that you are most worried about?**

If you are seeing your GP or nurse, it is important to tell them what it is you are most worried about.

#### **What are you expecting from the consultation?**

When you consult with a doctor or nurse, it is a good idea to think about what you are expecting. If you have any ideas about what you would like done, you should tell the doctor or nurse. This will allow them to try and deal with the things that you are expecting.

#### **Fever (Raised Body Temperature)**

- Fever is a normal response that may even help to fight infections.
- Fever does not harm your child. Bringing temperature down does not seem to prevent fits (see next page).
- Children with a high temperature ( $40^{\circ}\text{C}$  or more) are more likely to have a more serious infection (though most will not). Look at page 7 to see other signs of more serious infections.

#### **What can you do about it?**

To make your child more comfortable, you may want to try and lower their temperature by giving them Paracetamol and / or Ibuprofen (see also page 6). Take off outer clothing (do not wrap your child up if they have a fever). Sponging a child with water can sometimes make matters worse by upsetting a child or making them shiver (which can raise their temperature more). However, as long as it does not upset your child, bathing/sponging with luke warm water may help a little.



## Qallalka Heer-kulka (Febrile Seizures)

- Carruurta yaryari marmar waxay yeelan karaan qallal ay keentay heer-kulka xummaddu. Cabsideeday leedahay haddii ilmahaaga ay qabato qallal suuxdineed, laakiin sida qaolibka ah halis ma aha. Paracetamol ama ibuprofen la siiyaa ma celinayso qallalka.
- Haddii ilmahaaga ay qabato qallal – isku day inaad is dejiso. Qallalka badankoodu ilmahaaga wax ma yeelayaan waxayna hayn in ka yar 5 daqiqo.
- Haddii ayna ilmahaaga horey u soo qaban qallalka heer-kulka xumadda oo aadan aqoon waxaad samayn lahayd, sida ugu fiican waa inaad islamarkaaba ambalaas wacata 999.
- Waa fikrad fiican in la xaiijiyo in ilmaha uu qallalku hayo laga fogeeyo waxyaabaha ay wax isku yeeli karaan, waana in loo jifiyaa dhinacooda (Booska raysashada).

## Qufac/Laab Qufac

- Carruurta yaryar markay qaadaan dureyga waxaa sida badan ku dhalata 'laab guux' ama 'laab qufac'. Arintaasi waxay ku beertaa waalidka walwal waxayna aaminaan in laab qufucu yahay calaamad 'caabuq laabeed'.
- Carruurta yaryari waa u caado iney qaadaan laab guux. Taa waxaa sabab u ah iyagoo leh dhuumo hawada (neefta) ka yar yar kuwa dadka waaweyn iyo waliba saabka feeraha oo ka dhuudhuuban.
- Ilmaha qaba caabuq dhab ah oo laabta/feeraha ah aalaaba wuxu noqon mid 'saa'id u buka ama u il-daran' Fiiri bogga 7 astaamaha lagu garto mashaakkillada sii daran.

### Waqtii intee le'eg buu haynayaa?

Jaantuskani wuxuu ku tusayaa muddada qufaca carruurtu ku egyptay sida qaolibka ah. Wajiyadu waxay masalayaan toban carruur ah oo GP-gooda ugu tegey qufac. Wajiyada cagaaran waa kuwa muddadii ku soo raystay xilli kasta.

### Maxaan ka samayn karaa?

Qufucu wuxuu caawiyaa in jirku la dagaallamo caabuq muddayna qaadan karta inuu tago. Sharoobooinka qufucu waxay u badan tahay inaysan waxba ka tarin. Ka fiiri bogga 6 waxyaboo kale oo caawin kara.

### Antibiyootikyadu ma kaalmeeyaan?

Dadka qaata antibiyootikada intooda badan kama hor caafimaadaan kuwa aan qaadanin. Markaad eegto dadka waaweyn iyo carruurta qabta boronkiitada (qufaca laabta), isku cel-celis, dadka qaata antibiyootikada muddada uu qufucu haynayo wuxuu ka yar yahay maalin gelinkeed kuwa aan qaadanin.<sup>2</sup>

### Temperature Fits (Febrile Seizures)

- Young children can sometimes have a fit as a result of having a temperature. It can be very scary if your child has a seizure, but it is usually not serious. Treating fever with paracetamol or ibuprofen does not prevent fits.
- If your child has a fit – try to stay calm. Most of these fits will not cause your child any harm and will last less than 5 minutes.
- Unless your child has had previous febrile seizures and you are familiar with what to do, it is best to dial 999 immediately for an ambulance.
- It is a good idea to make sure a child who is having a fit is away from things they may hurt themselves on, and to roll them on their side (recovery position).

### Cough/Chesty Cough

- When young children catch a cold they often develop a 'noisy chest' or a 'chesty cough'. This can be worrying for parents who believe that a chesty cough is a sign of a 'chest infection'.
- Young children often get noisy chests. This is because they have smaller airways and thinner rib cages than adults.
- A child with a true chest infection will generally be more 'unwell'. See page 7 for signs of a more serious problem.

### How long will it last?

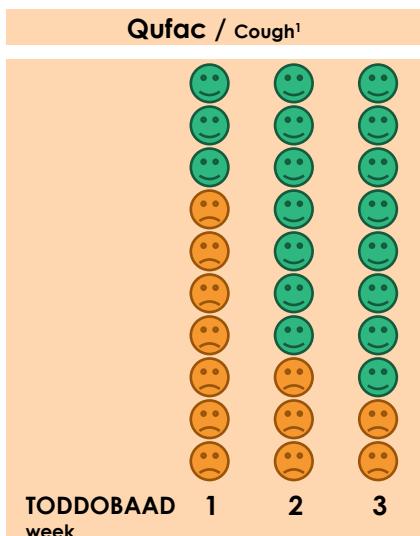
This chart shows you how long cough often lasts in children. The faces represent ten children who have seen their GP with a cough. Green faces are those who have recovered at each time period.

### What can I do about it?

Coughing helps the body fight against infection and can take a while to go. Cough syrups probably do not help. See page 6 for other things that may help.

### Do antibiotics help?

Most people who take antibiotics do not get better any faster than people who do not take them. Looking at adults and children with bronchitis (chesty cough), on average, people taking antibiotics will have a cough for only half a day less than those who don't.<sup>2</sup>



## Durey Caadi ah

- Dureyadu aad bay caam u yihii. Carruurta caadiga ah ee caafimaad qabta mararka qaarkood 8 jeer ama ka badan ayey sannadkii durey qaadi karaan

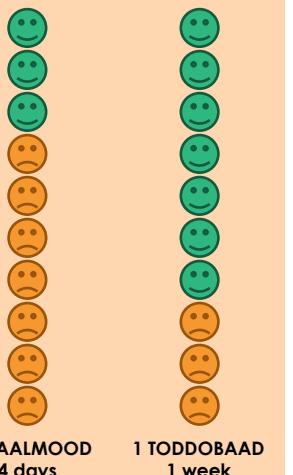
### Waqti intee le'eg ayuu haynayaa?

Jaantuskan ayaa fikrad kaa siinaya sida qaalibka dureyadu muddada ay hayaan (ruuxa). Wajiyadu waxay masalayaan tobani carruur ah oo GP-gooda ugu tegey durey. Wajiyada cagaaran waxay tusi kuwa ku bogsadey waqtiga xilli kasta.

### Antibiyootikyadu ma caawin?

Lama hayo wax caddayn ah iney antibiyootikyadu dureyga wax ka taraan.

## Durey / Cold<sup>3</sup>



## Xaako cagaaran/Duuf

- Waallidka iyo dhakhtarrada qaarkood waxay muddo dheer aamminsanaayeen in midabka dheecaanka sanka ka imanaya (duuf) uu astaan u yahay nooca (ama darnaashiiyaha) caabuqa.
- Baaritaan dhawaan la sameeyey waxay muujinaysaa in ayna arrintu sidaa ahayn. Duufka cagaaran ee sanka ka imanaya waxaa keeni kara noocyoo badan oo caabuqyo ah umana baahna in lagu daweyyo antibiyootikyo.<sup>4</sup>

## Cuno Xanuun

- Cune xanuunsan uma baahna wax daaweyn ah si looga saaro. Isagaa iskiis u raysanaya.
- Haddii ilmahaagu uu muuqdo inuu aad u buko ama uu leeyahay cuno xanuun iyo heer-kul, laakiin aan qufac jirin, in ka badan 3 maalmood, waa inuu arkaa dhakhtar ama kalkaaliye caafimaad.
- Uma baahnid inaad fiiriso cunaha ilmahaaga. Haddii aad leedahay, oo aad ka walwalayo quman waawayn, ma aha intaasoo keliya wax laga walwalo. Hayeeshee, haddii ilmahaaga dhib ka haysato neefsashada, ama uu u eyyahay inuu buko (fiiri bogga 7), si dhaqso ah ula tasho dhaqtarkaaga.

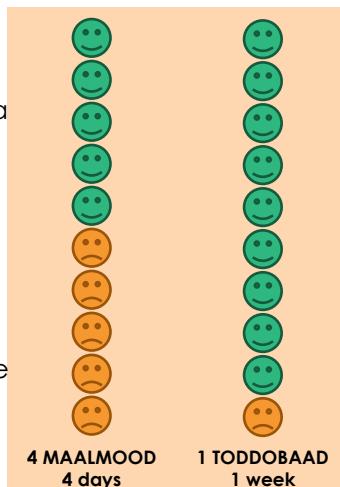
### Waqti intee le'eg ayuu haynayaa?

Jaantuskan ayaa ku tusaysa cuna xanuunka carruurtu inta uu aalaaba ku dhammaado. Wajiyadu waxay masalayaan tobani carruur ah oo GP-gooda ugu tegey cuna xanuun. Wajiyada cagaaran waa kuwa ku bogsaday xilliga waqtiga kasta.

### Antibiyootikyadu ma caawin?

Hal todobaad kadib, in ka badan afar-meelood seddex oo cunaha ka xanuunsan ayaa roonaan doona haddii ay qaataan antibiyootik ama aynan qaadanin. Inta badan (13 ruux 14kiiba) ee qaataay antibiyootik ayaa ku roonaada si u dhakhso badan sidi ay ku roonaan lahaayeen haddayna qaadaninba antibiootikyada.<sup>6</sup>

## Cuno Xanuun/Sore Throat<sup>3,5</sup>



### Common Cold

- Colds are very common. Normal, healthy children can sometimes have 8 or more colds in a year!

### How long will it last?

This chart will give you an idea of how long colds often last. The faces represent ten children who have seen their GP with a cold. Green faces are those who have recovered at each time period.

### Do antibiotics help?

There is no evidence that antibiotics help with colds.

### Green Phlegm/Snot

- Some parents and doctors have long believed that the colour of nasal discharge (snot) gave an indication of the type (or seriousness) of an infection.
- Recent research suggests that this is not the case. Green nasal discharge can be caused by many types of infection and does not need to be treated with antibiotics.<sup>4</sup>

### Sore Throat

- A sore throat does not need any treatment to make it go away. It will get better by itself
- If your child seems very unwell or has a sore throat and temperature, but no cough, for more than 3 days, he or she should see a doctor or nurse.
- You do not need to look in your child's throat. If you have, and you are worried about large tonsils, this is not, by itself, something to be concerned about. However, if your child is having difficulty breathing, or seems very unwell (see page 7), you should consult your doctor urgently.

### How long will it last?

This chart shows you how long sore throats often lasts in children. The faces represent ten children who have seen their GP with a sore throat. Green faces are those who have recovered at each time period.

### Do antibiotics help?

After one week, more than three-quarters of those with a sore throat will be better whether they take antibiotics or not. Most (13 out of 14) who take antibiotics will get better just as quickly as if they had not taken them.<sup>6</sup>

## Dheg-xanuun

- Caadiyan looma baahna in antibiyootik lagu daaweyyo caabuqa dhegaha. Xanuun bi'ye Paracetamol iyo/ama Ibuprofen ayaa ah caadi ahaan waxa loo baahan yahay oo idil.
- Haddii uu ilmahaagu qabo dhibaatooyin xagga maqalka, ama ay dhegi dhacaamayso, waa iney arkaan GP

### Waqfi intee le'eg ayuu haynaya?

Jaantuskani wuxuu ku tusi dhega-xanuunka caruurtu inta uu aalaaba ku dhamaado. Wajiyadu waxay masalaan tobantur ah oo ugu tagay GP-gooda dhego-xanuun. Wajiyada cagaaran waa kuwa ku bogsaday mar kasta xilligii.

### Antibiyootikyadu ma kaalmayn?

Hal todobaad kadib, in ka badan afar-meelood seddex oo carruurta ah ayaa roonaan doona haddii ay antibiyootik qaataan iyo haddii kaleba. Inta badan (14 ruux 15kiiba) oo ah carruutii qaadatay antibiyootikyada ayaa ku soo roonaada si la dhaqsiyo ah sidii ay ku roonaan lahaayeen haddayna qaadaninba.<sup>8</sup> Carruurta da'doodu ka hoosayo 2 ee labada dhegoodba caabuq ka hayo, iyo kuwa hal dheg caabuq qoyaan wata ku leh, ayey u badan tahay iney ka faa'iideystaan antibiyootikyada marka loo eego carruurta kale waana in carruurta uu dhaqtar arkaa.<sup>9</sup>

## Qufaca Booca

Qufaca Booca wuxuu ku dhici karaa caruurtu jirta 6 bilood ilaa 12 sano, laakiin aalaba wuxuu ku dhacaa caruurtu ka yar 3 sano. Waxa keena fayras (virus) gala booca iyo dhuumaha hawada ee kore wuxuuna abuuraa qufac 'ciya' (sida cida libaax badeedka). Aalaaba waxuu sii daran-yahay habeenkii.

### Maxaan ka samayn karaa?

Qaad oo u raaxee ilmahaaga si aad u dajiso – waxay u muuqataa in walwalku uu uga sii darayo qufaca booca. Sii ilmahaaga kakabasho uu caboo si uusan jirkiisu u dhanqalmin/fuuqbixin. Kor u farisintu ilmahaaga waxaa laga yaaba iney ka kaalmayso qufaca. Tallaabooyinka noocan oo kale ah ee fudud badanaaba way ku roonaadaan. Haddii ayna taasi dajjin ilmahaaga ama ay ilmaha dhibaato ka haysato neefsiga waa inaad dalbataa kaalmo (fiiri b.8.).

### Ilmahaagu waa inuu durba arkaa dhaqtar haddii:

- Neefsigoodu yahay deg-deg
- Margiyada ku wareegsan luqunta ama feeraha hoostoodu hoos u jiidmayo markay neefsanayaan
- Ay noqdaan kuwo kacsan, daalan (beercadaad), leh midab buluug-boor ama midab guur ama
- Aysan wax liqi karin, ama ay dhareerinayaan

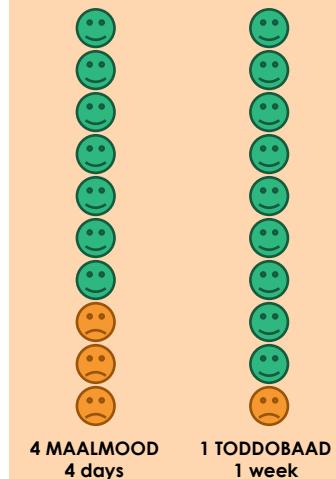
### Antibiyootikyadu ma caawin?

Antibiyootikyadu waxba kama caawiyaan qufaca booca

## Wax ma cunaayo/Cabaayo

- Aalaaba carruurtu markay bugto way cunis iyo cabitaan yar yihiin. Ku dhiiri-geli iney wax badan cabbaan. Intooda badan waxay billaabi iney cabbaan intayna dhanqalmin/fuuqbixin. Hayeeshee, waa inaad u fiirsataa calaamadaha dhanqalanka/fuuqbaxa sida sirir/suursanaan, indho iyo af qallal, ama kaadi yaraan. Tani waxay si toos ah u khusaysaa carruurta hal sano ka yar iyo kuwa matagaya.
- Carruurta intooda badan waxay socon karaan maalmo yar iyagoon wax badan cunaynin. Ka fiiri bogga 7 wixii talo ah marka ay tahay in aad kaalmo dheeri ah heshid.

## Dheg-xanuun/Earache<sup>7</sup>



### Earache

- There is normally no need to treat ear infections with antibiotics. Pain control with Paracetamol and / or Ibuprofen is all that is normally needed.
- If your child is having hearing problems, or the ear is draining, they should see a GP.

### How long will it last?

This chart shows you how long earache often lasts in children. The faces represent ten children who have seen their GP with earache. Green faces are those who have recovered at each time period.

### Do antibiotics help?

After one week, more than three-quarters of children will be better whether they take antibiotics or not. Most (14 out of 15) children who take antibiotics get better just as quickly as if they had not taken them.<sup>8</sup> Children under the age of two with ear infections in both ears, and those with an ear infection that is draining, are more likely to benefit from antibiotics than other children and should be seen by a doctor or nurse.<sup>9</sup>

### Croup

Croup can occur in children from 6 months to 12 years, but is most common in children under 3 years old. It is caused by a virus in the voice box and upper airway and causes a 'barking' cough. It is usually worse at night.

**What can I do about it?**  
Comfort and hold your child to keep them calm – anxiety seems to make croup worse. Give your child sips to drink to prevent dehydration. Sitting your child up may help them with the cough. Most croup will improve with simple measures like this. If this does not settle your child or they are having difficulty breathing you should call for help (see p.8).

### Your child should see a doctor urgently if:

- Their breathing is rapid
- The tissues around the neck or below the ribs are pulled in when they breathe
- They are becoming agitated, exhausted, bluish-grey or pale, or
- They can not swallow, or are drooling

### Do antibiotics help?

Antibiotics do not help with croup.

### Not Eating/Drinking

- Children often eat and drink less when they are unwell. Encourage them to drink plenty. Most will start to drink before becoming dehydrated. However, you should watch for signs of dehydration, such as drowsiness, dry eyes / mouth, or peeing less. This is especially so for young children (under 1) and those who are vomiting.
- Most children can go a few days without eating much. See page 7 for advice on when you should seek further help.

## Maxaan samayn karaa?

- Awood badan buu leeyahay nidaamka is-difaacidda jirka ilmuu, isagaana iska sifayn caabuqa caadiga ah.
- Wuxaad ku kaalmayn kartaa ilmahaaga inuu la dagaallamo caabuqa inaad xaqijiso iney helaan nasasho badan iyo inaad siiso cunto saxo leh (sida khudrada).
- Sii ilmahaaga wax badan oo ay cabbaan. Tani waxay ka kaalmayn iska celinta dhanqalan/fuugbaxa, duuf jilcinta, iyo cuna qoyn. Isku day inaad ka celiso cabitaanka sonkorta badan leh.
- Xanuun iyo qandho waxaa ugu fiican ee lagu daweyyaa waa Paracetamol iyo/ ama Ibuprofen.
- Siyaalo kala duwan bay Paracetamol iyo Ibuprofen u shaqeeyaan. Haddii mid keliya shaqayn waayo labadaba waa la isla isticmaali karaa. Wuxaad xaqijisaa uun inaadan siinin in ka badan intii lagugula taliyey mid walba.
- Daawooyinka la soo saarray aalaaba waxay waalidka u sheegaan ineyna isticmaalin wax ka badan laba cisho iyagoon arkin dhaqtar. Haddii ilmahaaga uusan Lahayn calaamadaha bogga 7, oo aadan aad oga walbahaarsanayn iyaga, waad wadi karta inaad ku daweyso muddadaa in ka dheer.
- Xaqiji in ruuxna uusan sigaar ku cabbin ilmahaaga agtiisa.
- Wixii talo ah ka fiiri qaybaha ku saabsan sidii aad ula xaali lahayd haddii aad ku aragto astaamaha qandhada iyo qufaca.

## Maxaadan u qaadanayn antibiyootikyada?

Waxaa jira sababo badan oo loo cuskan karo in aysan ahayn fikrad fiican qaadashada antibiyootikyada in sida dhabta ah loogu baahan yahay mooyee.

- Iisticmaalka antibiyootikyada waxay u yeeli kartaa bakteeriyyada adkaysi (iska caabin). Si kale haddaan u dhahno, antibiyootikyadu wax dambe kama tarayso bakteeriyyada. Ruuxii waqtii dhow qaatay antibiyootik waxay u badan tahay in jirkiisa ay ku jirto bakteeriya adkaysan leh. Bakteeriyyada qaardeed waxayba noqdeen kuwa adkaysan u leh inta badan antibiyootikyada oo dhan.
- Antibiyootikyada intooda badan waxay leeyihiiin dhibaato ay keenaan/laxan, sida shuban, furuuracyada jirka iyo calooshoo qasanta.
- Antibiyootikyadu waxay dilaan bakteeriyyada innagu beeran ee kaalmeeya ilaaliintenna. Tani waxay keeni kartaa caabuq sida cabeebka.
- Waxaa kaloo ay antibiyootikyadu keeni karaan xasaasiyad. Kuwaaso inta badan ah furuurac ka soo yaaca oo ku dhibaya, laakiin xaaladaha qaarkood noqon kara waxyeelo dawadu keentay oo aad u duran.



### What can I do?

- A child's immune system is very powerful, and will clear up most common infections by itself.
- You can help your child fight the infection by making sure they get plenty of rest and offering them healthy food (like fruit).
- Give your child plenty to drink. This will help prevent dehydration, loosen phlegm, and lubricate the throat. Try to avoid very sugary drinks.
- Pain and fever are best treated with Paracetamol and / or Ibuprofen.
- Paracetamol and Ibuprofen work differently. They can be used together if one alone has not worked. Just make sure you do not give more than the maximum recommended dose of either of them.
- These products often tell parents not to use them for more than a couple of days without seeing a doctor. If your child does not have any of the features on page 7, and you are not overly worried about them, you can continue to treat with these products for longer than this.
- Make sure no-one smokes around your child.
- See sections on fever and cough for advice on dealing with these symptoms.

### Why not take antibiotics?

There are several reasons why it is not a good idea to take antibiotics unless they are really needed.

- Using antibiotics can make bacteria resistant to antibiotics. In other words, the antibiotics will no longer work against the bacteria. Someone who has recently had antibiotics is more likely to have resistant bacteria in their body. Some bacteria have become resistant to almost all antibiotics!
- Most antibiotics have side effects, e.g. diarrhoea, rashes and stomach upset.
- Antibiotics kill our natural bacteria that help to protect us. This can result in infections such as thrush.
- Antibiotics can also cause allergic reactions. These are often just annoying rashes, but can, in some cases, be severe reactions.

## Goormaan kaalmo doontaa?

Ma jiro hage dhamaystiran. **Haddii aad wali u walwalayso ilmahaaga markaad akhrisato buug-yarahan hadaba waa inaad talo raadsataa.**

Taaso noqon karta talo talefoon ama la tashi dhaqtarkaaga ama kalkaaliye caafimaad ee GP-gaaga. Waxaa kaloo talo telefoon laga heli karaa NHS 111 iyo adeegga waqtiga aan la shaqaynin (ka fiiri dhabarka buug-yarahan lambarada lala xiriiri karo). **Haddii aad si dhaqso ah ugu baahan tahay talo garaac 111 (Ingriisiga), ama haddii aad dareemeysid in xaaladu deg-deg tahay (emergency) waa inaad ambalaas ugu wacataa 999.**

**Kuwan soo socda waa astaamaha laga yaabo iney yihiiin jirooyin xun:**

- Cadho dhawaan iyo suursanaan ku dhacda ilmahaaga. (Inkastoo carruurta leh heer-kulka ay yihii inta badan kuwa lulmo iyo cadho badan, xiisana aan lahayn marka loo eego sida caadiga ah, sida qaalibka ah way roonaadaan marka lagu daweyyo paracetamol iyo/ama ibuprofen. Haddii ay roonaan waayaan, ama ay aad u suursan yihii, sida ay runtu tahay waa iney si deg-deg ah u arkaan dhaqtar).
- Ilmahaaga waxaa haysa dhibaato neefsasho- oo ay ka mid tahay neefsiga oo uu boobsiyo iyo neefta oo ku yar ama 'si adag halgan ugu jira' inuu neefsado. (Waxaad mooda mararka qaarkood sidii iyadoo xuubabka u dhaxeeya feeraha iyo feeraha hoostooda hoos loo soo nuugayo markay neefsadaanba). Ilmo kasta oo dhibaato badan oo neefs ay haysato wuxuu u baahan yahay dhaqtar inu deg-deg ku arko.
- Qabow ama midab-doorsoon gacmaha ama cagaha ah iyadoo jirku diiran yahay (qandac yahay).
- Gacan iyo/ama lug xanuun daran (iyado sabab muuqata ayna jirin)
- midabka maqaarka oo aan caadi ahayn (midab khafiif ah, buluug ama boorka oo kale oo bishimaha hareerahoodu noqdaan)
- Heer-kul sarreeya ( $40^{\circ}\text{C}$  ama ka sarreeya) (qasab ma aha in taasi calaamad u tahay caabuq daran, laakiin marka daawada la siiyo ilmahaaga haddii heer-kulku uusan soo degin, ama uu ilmahaagu uu muujiyo calaamada kale oo liiskan ku jira waa inaad kaalmo raadsata).
- Ilmo aad u yar haddi uusan wax cunaynin ama ilmo kastoo ay ka muuqdaan calaamadaha dhanqalanka/fuuqbaxa

**Astaamaha la xiriira cudurka maskax-garaadka:**

- Sida qaalibka ah madax xanuun daran
- Luqun tigtigan (oo ay adagtahay in garku taabto laabta)
- Nalka cad uusan jeclayn
- Waxyalo jirka ka soo baxa oo aan cadaadis ku baabi'in ( fiiri bogga 8).

**Astaamaha kale oo GP-gu inuu eego ay tahay:**

- Qufac qaatay muddo ka badan 3 todobaad (ama in ka dhow haddii uu noqonaayo neef la'an si fudud ama qoysku leeyahay taariikh cudurka neefta).
- Qandho 24 saac ama ka badan haysa oo aan lahayn astaamo kale oo caabuq ah (qufac, san dareer, dheg-xanuun iwm.)
- Ilmahaaga oo miisaanku ka dhaco oo uusan soo ceshan 2 todobaad gudahood hadduu 5 sano ka yar yahay ama 4 todobaad gudahood ilmaha inta ka wayn.

### **When should I seek further help?**

No guide can be complete. If you are still worried about your child after reading this leaflet then you should get advice. This could be telephone advice or a consultation with a doctor or nurse at your surgery. Telephone advice is also available from NHS 111 and out-of-hours services (see contact numbers on the back of this leaflet). If you need urgent advice then dial 111 (England), or if you feel that it is an emergency you should dial 999 for an ambulance.

### **The following are signs of possible serious illness:**

- Your child is drowsy or irritable. (Although children with a temperature are often more sleepy, irritable and lacking interest than usual, they usually improve after treatment with paracetamol and / or Ibuprofen. If they do not improve, or if they are very drowsy indeed, they should see a doctor urgently).
- Your child has problems breathing - including rapid breathing and being short of breath or 'working hard' to breath. (It sometimes looks as though the tissues between the ribs and below the ribs get sucked in each time they breath). Any child who has a lot of difficulty breathing needs to see a doctor urgently.
- Cold or discoloured hands or feet with a warm body
- Severe arm and/or leg pains (for no obvious reason)
- Unusual skin colour (pale, blue or dusky around lips)
- High temperature ( $40^{\circ}\text{C}$  or higher) (not necessarily a sign of serious infection, but if the temperature does not come down with treatment or your child has other features on this list then you should seek help).
- An infant who is not feeding or any child that is showing signs of dehydration

### **Symptoms related to meningitis:**

- Unusually severe headache
- A stiff neck (difficulty putting chin to chest)
- Dislike of bright lights
- A rash that does not fade with pressure (see page 8)

### **Other symptoms that should be assessed by a GP:**

- A cough lasting more than 3 weeks (or sooner if becoming breathless more easily or there is a family history of asthma).
- A fever for 24 hours or more with no other sign of infection (cough, runny nose, earache etc.)
- Your child loses weight and does not re-gain it within two weeks in an under 5 year old, or within four weeks in an older child.

## Cudurka Maskax-garaadka/Furuuruca dhiig-sumowga (Meningitis/Septicaemia Rash)



Muuqaalada ay bixisay hay'adda cudurka Maskax-garaadka (Meningitis)

Images provided by the Meningitis Trust.

### TIJAABO MURAAYAD (DHALO).

Furuuruucnaan cadaadis ku baabi'in marka la riixo oo wali sii muuqda marka geeska muraayad aan midab lahayn xoog lagu riixo maqaarka. Tijaabada muraayada ee uu soo saaray Dr Peter Brandtzaeg

#### GLASS TEST

A rash that does not fade under pressure will still be visible when the side of a clear glass is pressed firmly against the skin. Glass test devised by Dr Petter Brandtzaeg

If you urgently need medical help or advice, call NHS 111 (England)

#### In an emergency dial 999 Summary

- Most common infections do not get better quicker with antibiotics.
- Most children with a cold, cough, sore throat or earache, who see their GP, will still be ill 4 days later. This does not mean that they need treatment or need to be seen again.
- One third of children who have seen their GP with a cough will still be coughing 2 weeks later. This does not mean that they need treatment.
- Only children with signs of more serious illness generally need to be seen by a doctor or nurse. These signs include:
  - Excessive drowsiness
  - Difficulty breathing or rapid breathing
  - Cold or discoloured hands &/or feet with warm body
  - Abnormal pains in arms &/or legs
  - Abnormal colour (pale or blue)

### Meelaha lala xiriio

Lambarka telefoonka GP-ga

GP phone number

Lambarka saacadaha aanu GP-gu shaqayn

GP out of hours number

Haddii aad si dhakhso ah ugu baahato kaalmo caafimaad ama talo, wac NHS 111 (Ingriska)

### Wixii xaaland deg-deg ah wac 999

#### Soo koobid

- Antibiyootikyadu ma soo dedejiyaan in dhakhso looga bogsado caabuqyada caadiga ah intooda badan.
- Carruurta intooda badan ee qaba durey, qufac, cuna xanuun ama dhieg-xanuun, ee arka GP-gooda, wali way sii buki 4 cisho ka bacdi. Taasi kama dhigna iney u baahan yihiiin daaweyn ama ay u baahan yihiiin in hadana la arko.
- Saddex meelood oo meel carruurta aragtay GP-gooda ee qufac ugu tagtag way sii qufici wali 2 toddobaad ka dib. Tani kama dhigna iney u baahan yihiiin daaweyn.
- Guud ahaan carruurta leh astaamo jirrooyin darran oo kaliya ayaa u baahan iney arkaan dhaqtar ama kalkaaliye caafimaad. Astaamaha waxa ka mid ah:
  - Suursanaan saa'id ah
  - Neefsiga oo ku adkaada ama neefsiga oo uu boobsiyo
  - Qabow ama midab doorsoon gacmaha &/ama cagaha ah iyada oo jirku diiran yahay.
  - Xanuun aan caadi ahayn oo gacmaha iyo lugaha ah.
  - Midab ka duwan kii caadiga ahaa (midab-guur ama buluug)

#### Tixraacyo/References

1. Hay AD, Wilson A, Fahey T, Peters TJ. The duration of acute cough in pre-school children presenting to primary care: A prospective cohort study. *Family Practice* 2003;20(6):696-705.
2. Smith SM, Fahey T, Smucny J, Becker Lorne A. Antibiotics for acute bronchitis. Cochrane Database of Systematic Reviews. Chichester, UK: John Wiley & Sons, Ltd, 2004
3. Butler CC, Kinnersley P, Hood K, Robling M, Prout H, Rollnick S, et al. Clinical course of acute infection of the upper respiratory tract in children: cohort study. *British Medical Journal* 2003;327(7423):1088-9.
4. Alftner A, Wilns S, Daubener W, Bormann C, Pentzak M, Abholz HH, et al. Sputum colour for diagnosis of a bacterial infection in patients with acute cough. *Scand J Prim Health Care* 2009;27(2):70-3.
5. Butler C. Unpublished data: Duration of sore throat in a cohort of children with URTI: Cardiff University, 2006.
6. Spinks A, Glasziou P, Del Mar C. Antibiotics for sore throat. Cochrane Database of Systematic Reviews 2006(4):Art. No.: CD000023. DOI: 10.1002/14651858.CD000023.pub3.
7. Little P, Williamson I, Warner G, Gould C, Gantley M, Kinmonth AL. Open randomised trial of prescribing strategies in managing sore throat. *British Medical Journal* 1997;314(7082):722-7.
8. Sanders S, Glasziou P, Del Mar C, Rovers M. Antibiotics for acute otitis media in children. Cochrane Database of Systematic Reviews 2004(1):Art. No.: CD000219. DOI: 10.1002/14651858.CD000219.pub2.
9. Rovers MM, Glasziou P, Appelman CL, Burke P, McCormick DP, Damoiseaux RA, et al. Antibiotics for acute otitis media: a meta-analysis with individual patient data. *Lancet* 2006;368(9545):1429-35.

Buug-yarahan waxaa diyaarisay Waaxda Daryeelka Asaasiga ah iyo Caafimaadka Dadweynaha, Jaamicadda Cardiff, bishii Maayo 2006, waxaana dib loo eegay bishii Juun 2010. Waxaan jeelaan lahayn inaan u mahad naqno waalidki, GP-yadli, iyo dhaqaatiirta caruurta ee kaalmada ka geystey in la hirgeeliyo buug-yarahan, iyo Mu'asasada Cilmi-baarista Caafimaadka oo mashruucan maal-galisay.