

Opinion Article

Parents' Guide to Understanding and Managing Late-Onset Laryngomalacia in Infants

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Introduction

It is common for babies to breathe noisily, which is a concern for many parents. Because of small nasal passages, as baby weight increases over days, babies will take a lot of breath, causing whistling sounds, which are usually both phases of respiration. These sounds are very prominent in obese children. If it is not associated with a cold or cough, no worries. Nasal blocks also cause sounds. But one usual cause is laryngomalacia, a condition in which the tissues that form a baby's voice box are soft and thus result in noisy breathing. This article will explain why this occurs, particularly when it starts a few weeks after birth, to assist the parents in handling it.

Laryngomalacia is a condition that occurs when the tissues that are present at the top section of the windpipe or the larynx are softer than they should be. In this condition, the larynx is a softer structure that collapses slightly during breathing, producing noises. This condition is often congenital, but in some babies, the signs may take 2-3 weeks after birth, especially in preterm newborns. This delay can be attributed to the relatively weak breathing attempts at birth, followed by more vigorous breathing as the baby stirs or has faster or deeper breathing. These increased respiratory efforts make the floppiness more apparent, which explains the noisy breathing typical of this syndrome. Understanding this can help parents become aware of the fact that the majority of cases of late-onset laryngomalacia are not severe. Many parents come to OPD, as my baby was fine at birth but recently, a few weeks later, came with sounds and distress.

Laryngomalacia is characterized by stridor, a gentle whistling sound mainly heard when the child inhales. Stridor, however, is different from other newborn sounds, like the occasional rattle or even the average grunt. Because of the large aretenoids, the neck area may be protruding during retractions.

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Noisy breathing in infants is often observed temporarily and does not affect feeding or cause the baby too much discomfort. However, where the noisy breathing is chronic, seems to upset the baby, or interferes with the baby's feeding, this may indicate something more serious that should warrant a visit to the doctor.

For mild laryngomalacia, put your baby in a prone position in a room with fresh air since this helps improve their breathing. It is also advisable to raise the head of the crib slightly off the ground. It is essential to observe your baby's breathing rhythm for some time. If there is a sign of strain in breathing, constant sounds, or difficulty in feeding, proper medical attention should be sought. Therefore, promptly consulting with healthcare providers regarding any changes in the baby's breathing or behavior is important because they provide further management to enhance the baby's health while relieving the parent's anxiety [1].

Understanding and identifying late-onset noisy breathing, such as laryngomalacia, is also essential. However, it is generally not severe, and constant supervision and minor procedural measures at home may help to alleviate the symptoms. It is crucial to seek the assistance of healthcare professionals to ensure your baby's well-being and address any issues.

Reference

1. Leonard JA, Reilly BK (2021) Laryngomalacia in the Pre-mature Neonate. Neoreviews. 22(10): e653-e659.