Green noses

One of the most common queries for the public health team regards 'green noses' and whether children with green noses should be excluded from the early childhood centre.

What causes a runny nose?

Children can have a runny nose for several reasons:

- Allergy.
- Sudden change in temperature or very dry air.
- Infection.

Viral infections

The most common diseases affecting the human population are upper respiratory tract infections (UTRIs, colds) with children contracting six to nine colds each year.

The mucus sitting in the nose and chest during a cold is a breeding ground for bacteria which is why it is important to encourage children to blow their noses. As the cold starts to go away, the bacteria may also go away because the conditions are no longer so favourable. Sometimes the bacteria continue to grow and cause a secondary bacterial infection (the primary infection is the cold virus). This can occur in the sinuses, the chest, or the ears.

The problem is that the common cold virus can cause green nasal secretions and a phlegmy/congested sounding cough. This however does not signify that a **bacterial** infection is **definitely** present. This should be determined by a doctor who will make a diagnosis based on how long the child has been unwell, how bad the symptoms have been and other examination or investigation. This will help to determine whether the infection is viral, bacterial or the result of an allergy.

What does the colour mean?

The colour of nasal discharge may change during the course of the URTI from clear to yellow, to green. This colour change is linked to the recruitment of 'leucocytes' (these blood cells engulf and digest bacteria and fungi and are an important part of the body's defence system). The greener the discharge the more leucocytes have been recruited.

So the colour of the discharge describes **HOW** the body is dealing with the infection as opposed to **WHAT** the body is dealing with.

Exclusion period

The decision to exclude a child is one that is not made lightly by early childhood teachers. It is a fine balance advocating for the individual child, ensuring the wellbeing of the centre whānau and understanding the challenges facing parents and caregivers.

A child should not attend the centre when:

- They are coughing and sneezing a lot (in cases of allergy this may not be applicable).
- The child has a persistent runny/messy nose (when secretion spread is likely).
- The child has consistent congestion. In such cases it is important for a child to see a doctor as this could lead to glue ear or other serious infections.



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Some considerations which may help you make a decision:

Think about the social impact for the child with the persistent runny nose. This is unpleasant for the child, the teacher and their peers. Ask yourself:

- Is this child included in group activities?
- What kind of social interactions does he/she have with teachers?

A lack of inclusion by peers and teachers will not create a sense of wellbeing and belonging.

A child may have a persistent green runny nose but may still be able to take part comfortably in the programme of activities, and may not require any extra attention. Early childhood teachers can usually make this judgement based on their knowledge of individual children.

If you are worried about a child who often has a green runny nose or appears consistently congested, discuss concerns with the parents/caregivers and recommend the child see a doctor.

Ultimately any decisions are made at the discretion of the centre manager/supervisor.