

Colds (Upper Respiratory Infections)

About Your Diagnosis

Colds are caused by viruses infecting the linings of the nose, sinuses, throat, tonsils, and sometimes the lungs. They are spread by contact with virus on an object or from another's coughing or sneezing. There is no association with cold weather or getting wet, except that during these times people are indoors more often and more likely to spread the viruses. So viruses often show up in the fall or winter, and sometimes in the spring. You may be more susceptible to colds during times of excessive fatigue, stress, menses, or in people with seasonal allergies. Flu shots given before influenza season help prevent some of the more serious viral infections, but not colds or bacterial infections.

About Your Symptoms

Onset of symptoms is often sudden and occurs 1 to 5 days after contact with an infected person. Symptoms may include fever, chills, nasal drainage, difficulty swallowing, poor appetite, fatigue, and body aches. Sore throat may be among the early symptoms but usually resolves quickly. Coughing is a primary symptom and may or may not produce phlegm. Ear and sinus pain may also occur. A cold typically runs it's course over 7 to 14 days.

Treatment

Viruses are not "killed" by antibiotics, so they do not help speed along the process of a cold or sore throat. Many bacteria are becoming resistant to antibiotics because they are often overused. So antibiotics should be given only if absolutely necessary. Fever is an expected, natural defense of your body. Pain relievers (as below) may be taken if the fever is not tolerable. As there is no cure for a cold, treatment is directed at the relief of symptoms. The recommendations below may help, even if not completely better after a week.

- Pain relievers like acetaminophen (Tylenol), ibuprofen (Motrin, Advil), or aspirin are very effective for pain and fever. Aspirin should not be used in children under 18 years of age because of an increased risk of Reye's syndrome. People who are pregnant, taking warfarin (Coumadin), or have kidney or heart failure should take only acetaminophen (Tylenol) unless directed otherwise by their doctor. Acetaminophen and other pain relievers should be avoided in people with liver disease or if you consume more than 3 alcoholic drinks a day.
- **Decongestants** may help nasal congestion and drainage. When taken by mouth these may make you feel jittery or keep you awake if taken near bedtime (pseudoephedrine, Sudafed). They are also available in nasal sprays like Afrin or 4-Way (oxymetolazone or phenylephrine). Decongestant nasal sprays may make congestion worse if used for more than 2 to 3 days. Do not use any form of these without your doctor's permission if you have high blood pressure, glaucoma, or heart problems.
- Antihistamines like diphenhydramine (Benadryl) and Chlortrimeton (chlorpheniramine) are less effective for congestion and drainage when due to colds, but may be helpful. They are very good for sneezing, environmental allergies and hay fever. As antihistamines can cause drowsiness they may help you get a better night's sleep for a short term. They should be avoided if you have prostate problems, bladder obstruction problems or glaucoma. As they are sedating use caution when driving, do not use heavy equipment, and consult your doctor if you take sedatives or tranquilizers.
- Cough syrups (Robitussin or Robitussin DM) can help if a cough is causing you soreness or keeping you up at night. Cough syrups with cough suppressants such as dextromethorphan ("DM" after the name) may allow you more rest. Expectorants like guaifenesin (the main ingredient in most cough syrups) stimulate the flow of mucus in dry, hacking coughs. Diabetics should avoid sugar-containing syrups. People with alcohol problems should avoid cough syrups with alcohol. A prescription cough syrup may be necessary, but these can be potentially addicting. (continued)

The DOs

- Get lots of rest and extra sleep.
- Drink up to 2 quarts of liquids a day to avoid dehydration (less if you are on a fluid restriction, for example kidney disease or congestive heart failure).
- Follow a liquid diet if swallowing is difficult (soups, juices, Jell-O and ice cream).
- A cool mist vaporizer may help relieve nose and throat irritation. Clean the vaporizer and change the water daily according to the manufacturer's instructions.
- Warm salt water gargles used hourly can help relieve a sore throat (1/2 teaspoon salt in 1 cup warm water).
- Lozenges or hard candy may also be soothing (sugar-free candy for diabetics).
- If sneezing or coughing you should avoid dusty or smoke-filled areas.
- Always read the labels and ingredients of all over-the-counter and prescription medications to make sure you do not have allergies, contraindications, or a history of adverse reactions to them.
- Wash your hands often to prevent spreading the virus to others.

The DON'Ts

- Don't take anyone else's antibiotics or prescription medications.
- Don't share food, drinking glasses or toothbrushes.
- Don't smoke it will further irritate your airways and make coughing worse.
- Don't drink alcohol it may interact with medications, mask symptoms, and cause dehydration.
- Don't use mouthwashes as they may be more irritating.

When to Call Your Doctor

- If fever of 101° or higher lasts longer than a day.
- If a cough develops that brings up thick, yellow/green, bloody or dark sputum (a cough from a tickle in the throat or nose drainage is normal).
- Bad face or head pain with yellow/green drainage from the nose.
- Throbbing pain or decreased hearing in an ear.
- If a rash develops.
- If a severe headache occurs.
- If there is nausea, vomiting, or increased difficulty swallowing.
- If there is dizziness or lightheadedness.
- Difficulty breathing either because of wheezing, throat swelling, or a sense that there is fluid in your lungs.
- A prolonged sore throat that does not improve in 1 to 2 days.
- Extended loss of appetite or fluid intake (2 days or more) leading to dehydration.

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