

COMMON COLD (Upper Respiratory Infection – URI)

Definition: A "cold" is a viral infection of the upper respiratory passages (nose, throat, sinuses, Eustachian tubes, trachea and voice box). Symptoms may include a runny or congested nose, sneezing, sore throat, hoarse voice, cough, fatigue, and body aches. The color of secretions (green or yellow vs. clear or white) has **no** relationship to whether the cause or your child's illness is viral or bacterial. Onset of a cold is usually gradual, as is the recovery.

Cause: Over 100 different specific viruses may cause colds. A virus that causes a cold can be caught from within the family or from contact within the community such as the grocery store or church. When someone with a cold coughs or sneezes, the virus can be spread through the air directly to another person. The virus can also be spread onto surfaces such as table, counter or children's toys. If the surface is touched, the virus can be spread from the surface to the person who touched the object.

Expected course: Colds may last from 3 to 14 days. It is not at all uncommon for a cough to last up to 3 weeks. Colds are contagious for 1 to 2 days before symptoms appear and continue to be contagious until 2 – 3 days after the symptoms go away.

Home Care and Treatment

Viruses cause colds, and there is no cure for the common cold. Antibiotics are of no benefit in treating colds because they cannot kill the viruses that cause the infection. Treatment, therefore, is aimed at making the symptoms feel less severe and helping to support the body as it tries to heal itself. Many colds do not need treatment except the usual advice: eat well, drink plenty of fluids, and get lots of rest. Also, note that frequently children are not as bothered by nasal congestion as adults are and may not need treatment to help clear the nose. The following guidelines may be helpful if you feel your child needs some symptomatic relief of symptoms due to a cold.

Saline nose drops: Warm salt-water nose drops can help soothe the nasal passage and break up secretions that cause congestion. Saline nose drops may be purchased over the counter or made at home by mixing ¼ teaspoon of salt with 1 cup of water. If necessary place 2 – 3 drops of the solution in each of your child's nostrils every 30 minutes to an hour when your child is awake. When the drops run out of your child's nose, wipe them away with a tissue.

Suctioning: Sometimes frequent and/or vigorous suctioning can cause swelling of the nasal airway and increased mucous production, which can cause an increase in congestion. Occasionally, however, parents find that their child is not able to handle the mucous and feel that suctioning is needed. If necessary, use of a blue bulb syringe may sometimes help clear the nose of children who cannot blow their nose. It is important to suction very gently after using the saline nose drops. Try to suction gently only once or twice a day and only if you feel it is really needed.

Humidifier: It should be noted that sometimes children do worse when a humidifier is used. If you find this to be the case, then you shouldn't use a humidifier in your child's treatment. Sometimes the use of a humidifier in your child's bedroom can help thin the secretions that cause cough and congestion. In order to help prevent bacteria from growing in the water, change the water in the unit every day. We recommend a cool mist humidifier. If you have a vaporizer that uses heat, it is VERY important to use care so that you child is not at risk of being burned by the steam of the vaporizer.

Medications

It is important to remember that medications will not cure a cold. They only help relieve symptoms. Sometimes over-the-counter medications can actually increase problems. These medications may also be dangerous for children less than 1 year of age due to the risk of sometimes life-threatening side effects.

Acetaminophen and Ibuprofen: Using over-the-counter pain and fever reducing medications such as *Tylenol* or *Motrin* (*Motrin* in children over 6 months of age) may help decrease your child's fussiness.

Antihistamines: Sometimes antihistamines such as Benadryl can help relieve dry, hacky coughs and runny or stuffy noses. They may make your child sleepy or, in some cases, hyperactive.



COMMON COLD (Upper Respiratory Infection – URI)

Cough syrups: Coughing is the body's way to remove mucous from the throat and lungs and may help prevent development of pneumonia or bronchitis. We advise against using cough medicine unless the cough is preventing your child from sleeping. We prefer products that contain *dextromethorphan*. We don't generally use products that contain *codeine*. *Contact our office before using such products*.

Decongestants: In children older than 2 years, follow the package directions contact us for the proper dosage. Please remember that the action of decongestants is to dry out the secretions in order to make the upper airway feel clearer. This can make secretions thicker and stickier and, therefore, harder to cough or blow out.

Camphor rubs: Medications that contain camphor, such as Vicks VapoRub, have been known to cause seizures in some children. We advise against the use of these medications.

Children Two Years of Age and Older: Medications that contain camphor, such as Vicks VapoRub, have been known to cause seizures in some children. We advise against the use of these medications.

Call the office...

Immediately if:

- 1. Your child is struggling to breath, such as the chest and/or abdomen pulling in and out with each breath.
- 2. You notice that the lips, nose, or fingertips are bluish.
- 3. Your child is drooling much more than usual.
- 4. Your child starts acting very sick.

During regular office hours if:

- 1. Your child has a fever for more than 3 days.
- 2. Your child has nasal discharge for more than 2 weeks.
- 3. The skin under the nostrils becomes scabbed over.
- 4. The eyes develop a yellow or green discharge.
- 5. Your infant can't take adequate fluids due to congestion.
- 6. Your child is fussy and unable to sleep at night. (Seems in pain.)
- 7. You feel that your child continues to get worse instead of better.
- 8. You have any other questions or concerns.