TREATING THE COMMON COLD

There are >800 over-the-counter cough and cold preparations currently available. Unfortunately, little scientific evidence supports the efficacy of these products for relieving the symptoms of the common cold <u>in children</u>.

- ➤ DECONGESTANTS: They reduce congestion by causing the blood vessels to close down. It takes 30 to 120 minutes for these medications to hit peak levels in the blood. Side effects include: rapid heart rate, irritability, sleeplessness, hypertension, headaches, nausea & vomiting. In adults, these medicines have proven effective in reducing nasal symptoms (congestion & sneezing). NO STUDIES DOCUMENT SIMILAR BENEFITS IN CHILDREN!
- ➤ ANTIHISTAMINES: Commonly used to treat cold symptoms, although their purpose is to treat allergies. Research has clearly shown that histamine levels in nasal secretions do not increase during a cold. There are few well-designed studies of children with colds using antihistamines. Antihistamine/decongestants-have not been shown to decrease the incidence of ear infections in children with colds.
- MORE THAN HALF OF THE CHILDREN STUDIED WERE BETTER TWO DAYS LATER REGARDLESS OF WHETHER THEY RECEIVED DRUG TREATMENT OR PLACEBO.
- COUGH SUPPRESSANTS: Cough suppression may be harmful in asthma, pertussis and cystic fibrosis. A study of children between 18 months and 12 years of age reported no difference in cough reduction among groups receiving placebo, dextromethorphan (the most commonly used non-narcotic cough suppressant), and codeine. COUGH DECREASED IN ALL PATIENTS AFTER THREE DAYS.
- ➤ OTHER MEDICINES: Many children & adults use acetaminophen and ibuprofen to treat the fever & discomforts of colds and in one study, these medicines suppressed the body's own antibody response. These people also showed a trend toward a longer period of viral shedding (or sharing their virus.) The benefits of Echinacea and Vitamin C have yet to be demonstrated in any studies.