How do we catch colds?	Exposure to someone with a cold
	More susceptible if:
	- Lack of sleep
	- Poor nutrition
	- Stress
	 Getting chilled
	- Toxicity
	 Immune suppression
	- Too much exercise

	- Too much	n exercise
		reatments
· · · · · · · · · · · · · · · · · · ·	rmaceutical	Pharmaceutical
Rest		Analgesics/ antipyretics
- Immune response		- Malaise
Adequate hydration		- Raised temperature via immune response
- Mouth breathing		Decongestants
- Increase fluid se		- Sympathomimetic's, inhalation products
Analgesics/	Paracetamol & ibuprofen (
antipyretics - Peak effect of temperature reduction (2.5 – 3 hours) Evidence:		perature reduction (2.5 – 3 hours)
		s only with paracetamol and ibuprofen not aspirin
		d slightly better outcomes in children and patients with LRTI
	Aspirin dispersible 300mg	- 11 K
- Gargle with 2 table		ets up to QDS
	- Systemic analgesic	and anti-inflammatory effect
	- Avoid in: pregnance	ets up to QDS and anti-inflammatory e fectors y, breast feeding (16 % a.s.)
Chlorphenamine, Tripro		ants (ant (n) standes) 1 st generation (some evidence)
- ?Histanne (2) - Anticholinergic (2) - Sedation Antihistamines: The Evidence	RCT of 113 patients on 12m Significant reduction in: - Volume of nasal ma	ucus produced reported rhinorrhea erity of sneezing
· · ·		no significant impact
	No evidence for 2 nd genera	
		ts (sympathomimetics)
Alpha 1 agonists:		Examples:
- Peripheral vasoo	constriction	- Pseudoephedrine
(arterioles of nasal mucosa and sinuses)		- Phenylephrine
- Reduces mucous production		- Oxymetazoline
		- Xylometazoline
ORAL	_	

Phenylephrine; lasts 2-3 hours (GSL)

Beechams All in One = 10mg, max 40mg/day