

SURVIVING COLD & FLU SEASON

How to Cope with This Year's "Invisible Intruders"

By Julianne Hale

The cold and flu viruses sneak up on us like thieves, creeping into our bodies and homes from inside the lungs and nasal passages of our friends, schoolmates, and neighbors (yuck!), turning our lives upside down and rapidly spreading to every person under our roof. How do we recognize them? What do we do to treat them and evict them from our bodies? And, most importantly, what kind of security measures do we need to take to make sure that neither enter our homes or bodies this year?

To answer these questions, we must first understand our intruders. The common cold and influenza (flu) are both viral infections that produce similar symptoms in the bodies of the unfortunate souls they inhabit. A lab test of your blood or respiratory secretions can provide a definitive diagnosis, but a simple check of your symptoms can usually allow you to distinguish between the two infections.

Intruder #1: The Common Cold

The Merck Manual defines the common cold as "a viral infection of the lining of the nose, sinuses, throat, and large airways." It typically begins with a scratchy or sore throat, and turns into a runny nose, congestion, and a cough after one to two days. Nasal secretions begin watery, but change to thicker, darker secretions as the cold progresses. Some people may have a slight fever at onset.

If you are one of the 1 billion people who experienced the common cold last year, then you know that the symptoms are unpleasant, but not unbearable. The virus is contagious for the first three days of sickness and symptoms usually last about a week, although a cough may hang on longer.

If symptoms do not get better after 10 days, you may be at risk of triggering complications like sinusitis, a middle ear infection, or asthma. If you suspect you have developed one of these conditions, see a doctor because you will likely need medication or treatment to get better.

Intruder #2: The Flu

Caused by one of many influenza viruses, the flu comes on suddenly and packs a wallop. Chills are typically the first symptom noticed, followed by a full-blown fever, body aches, sore throat, runny nose, a cough, and general fatigue. The most intense symptoms usually persist for three to five days, but the general fatigue can last for weeks.

Unlike a common cold virus which invades the nose and throat, the flu attacks the bronchial tubes and lungs, making it a much more serious condition. Flu complications should not be taken lightly. Pneumonia is one of the most common complications and can be



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“Unfortunately, anyone who is healthy can be subject to bad outcomes from the flu. That’s why we recommend flu shots to anyone over 6 months old. However, there are some groups that are more likely to have issues—anyone with respiratory issues such as asthma or COPD/emphysema, and anyone with reasons to have a compromised immune system like diabetics, pregnant women, and people with chronic illnesses or cancer. These groups definitely need a flu shot, but even if you aren’t, consider asking your doctor for a flu shot this year!”



Katie Gooden, M.D., Family Medicine, Galen East Internal Medicine/Pediatrics

life-threatening for the elderly, the very young, pregnant women, and individuals with compromised immune systems.

What to Know About Contagion

There are over 100 viruses that can cause the common cold, but the most widespread offender is the rhinovirus. Entering the body through the mouth, eyes, or nose, this virus is the reason every elementary school teacher on the planet keeps an arsenal of antibacterial gel on hand.



We all remember the swine flu pandemic of 2009—one day, we were watching news reports of a new disease outbreak in Mexico, and a week later, it seemed like half of the world was sick. That’s just how aggressively the influenza virus spreads when someone who has the flu coughs, sneezes, or even talks.

Since symptoms present one to four days after exposure to the virus, it’s fairly common for people to spread the flu to everyone they come into contact with without knowing it. The virus is contagious even the day before a person has their first symptom, and it remains contagious for five to seven days after symptoms begin.

Looking for the best flu season advice? Listen to your kindergarten teachers. Wash your hands, cover your mouth, keep your hands in your pockets, and, please, don’t lick the handrails.

What to Know About Remedies

The first order of business is to get plenty of rest and fluids. Regardless of which virus you have, these two natural remedies cannot be emphasized enough. After these are checked off, you can focus on symptom relief.

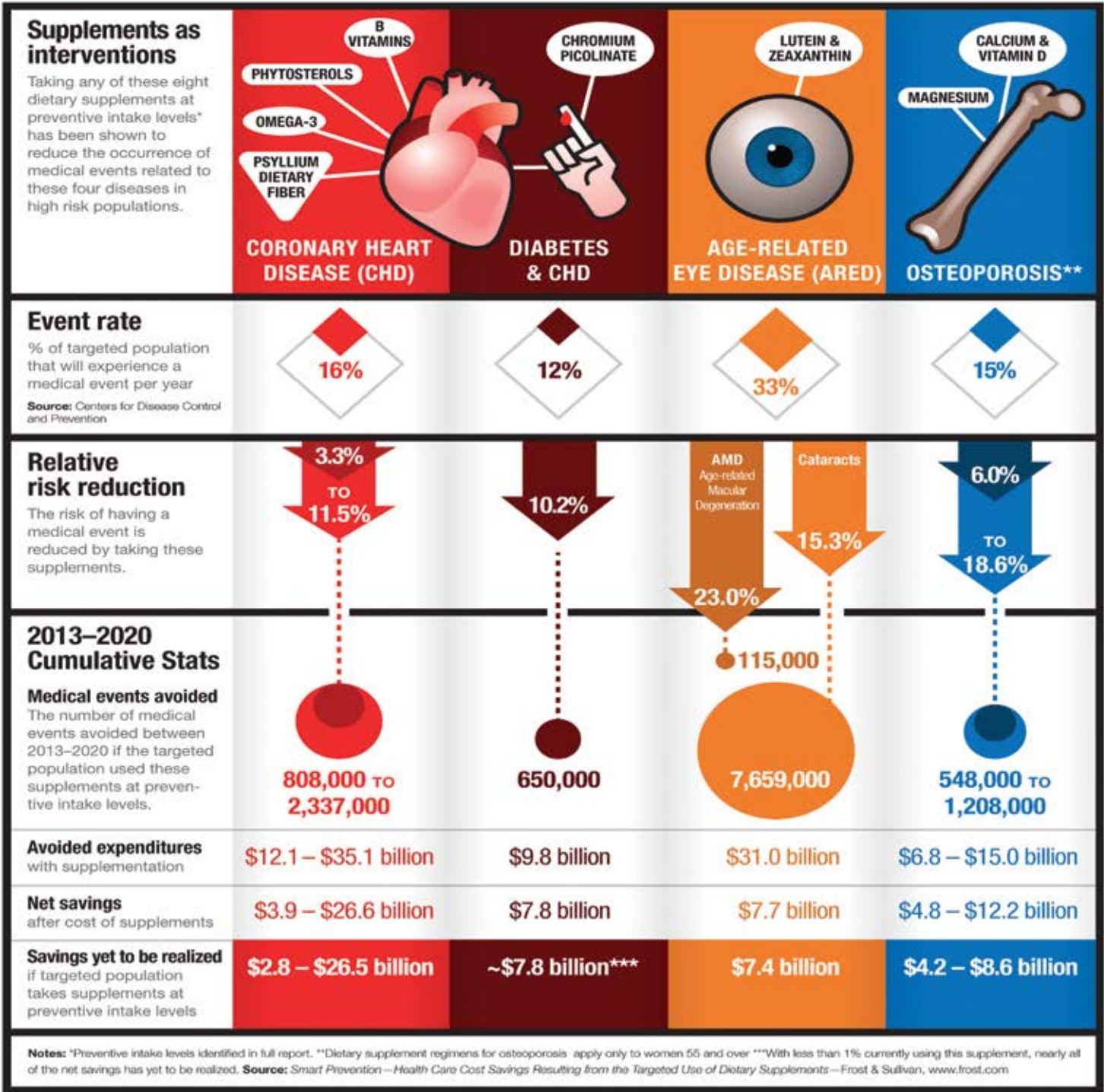
Don’t fall into the trap of making the medicine search more difficult than it has to be. Search for drugs designed to relieve your symptoms—nothing more, nothing less. If you have a cough and a stuffy nose, look for cough suppressants and decongestants. You might even be able to find the perfect combination of a cough syrup with decongestant built in. Just make sure it doesn’t relieve headaches, too. You don’t want to treat symptoms that you don’t have.

The most common over-the-counter medications used to treat the cold and flu are antihistamines, decongestants, cough

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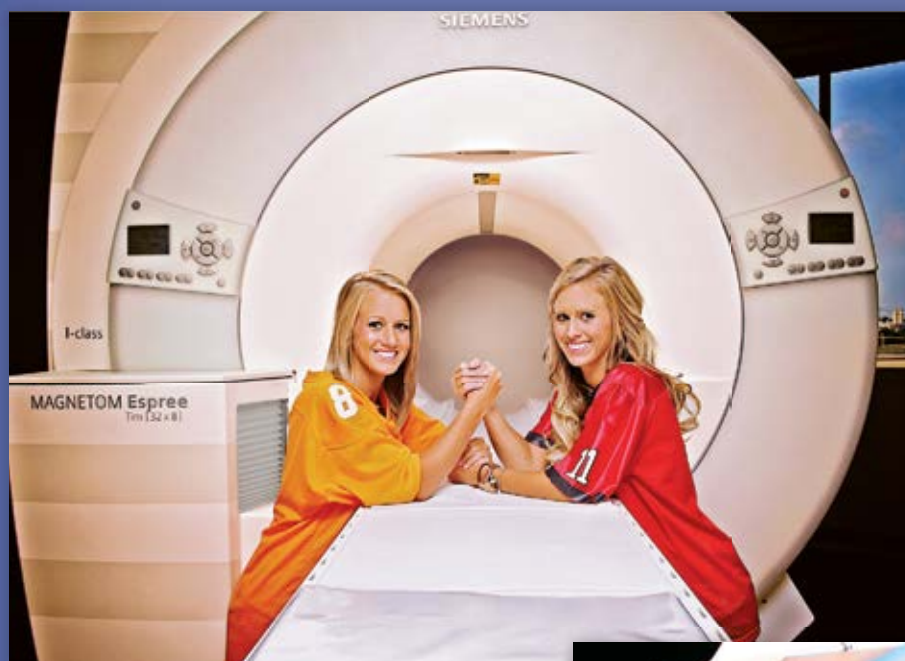
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“The ‘flu’ is an epidemic seasonal disease. Most of our theories about why the season is in the winter seems to coincide with our lifestyle in the winter—we stay in smaller spaces and huddle closer together in the cold. Since this increases the likelihood of transferring respiratory droplets, we have higher incidence. In the U.S., flu has a peak incidence in January and February, which are our coldest months. A curious note is that in the southern hemisphere, the flu occurs in the inverse season (June and July in South Africa, for example) and varies little seasonally along the



equator, like the Caribbean.”

Brian Breetzke,
M.D., family
practitioner,
IMG, Cleveland,
TN

dients. Acetaminophen, a common pain reliever found in Tylenol and other medications, can cause liver damage if taken in excess. More than 600 over-the-counter medications contain acetaminophen, so it’s really easy to accidentally double up your intake. Never take two medications together containing the same ingredient and always read labels carefully.

For those of you lucky enough to catch the flu, your best bet is to head to the doctor as soon as symptoms develop. If caught less than 48 hours after symptoms start, a doctor can prescribe you an antiviral medication

suppressants, and pain relievers like acetaminophen (Tylenol®) or ibuprofen (Advil®).

Antihistamines work by blocking the action of histamine, the body chemical responsible for congestion, sneezing, runny nose, and itching. Popular brand names include Benadryl®, Claritin®, Zyrtec®, and Allegra®. Be warned: these drugs, while quite effective, can cause drowsiness.

Decongestants work by shrinking the blood vessels in the nasal membrane, allowing the air passages to open up. They are chemically related to the stimulant adrenaline, so side effects may include feeling jittery or nervous, difficulty sleeping, or an elevated blood pressure and pulse rate. Common brand names include Drixoral®, Dimetapp®, and Sudafed®. Decongestants in the form of nasal

sprays can be effective, but should be used with caution. Prolonged use can cause chronic rebound inflammation of mucous membranes and prevent you from getting better.

Dextromethorphan, a cough suppressant commonly labeled “DM” on cough syrup labels, is the best remedy for a dry cough. Popular cough suppressants containing dextromethorphan include Benylin DM®, Robitussin®, Vicks® Cough Relief, and Delsym®.

Expectorants like brand name Mucinex® are the best treatment for a wet cough (those producing mucus). Look for pills or cough syrups containing the ingredient guaifenesin.

It’s important to check dosing recommendations when dealing with over-the-counter medications, but you should also make sure to keep an eye on ingre-

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After practicing orthopaedic surgery in the Chattanooga area for many years, Dr. John Nash joined the Center for Sports Medicine & Orthopaedics in August of 2013. His sub-specialty interests include hip and knee replacement, sports medicine, arthroscopy, and trauma.

Attending the University of Southern California for his undergraduate studies, he graduated Summa Cum Laude with the highest honors and

awards including being tapped for Mortar Board, Skull and Dagger Society and the Order of the Palm.

He earned his medical degree at Harvard Medical School in Boston, Massachusetts where he cared for patients at the many excellent, affiliated hospitals throughout Boston including Massachusetts General Hospital, Brigham and Women’s Hospital, Beth-Israel Hospital, Children’s Hospital Boston, New England

Deaconess Hospital, and Dana-Farber Cancer Institute.

Returning to University of Southern California + Los Angeles County Medical Center (Keck School of Medicine of USC) for post-graduate training, he was awarded the “Orthopedic Intern of the Year” as well as recognition for his extensive research. After completing his residency, he found Chattanooga to be an ideal place to live.

Dr. Nash currently serves on the Board of Directors of the Memorial Health Care System and chairs their Quality Committee. He is also past Chief of Staff and serves as Chairman of the Credentials Committee.

Dr. Nash and his wife, Susan, are blessed with six children. They enjoy spending time with their family, participating in their educational and sporting events and a variety of outdoor activities.

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“It’s sometimes difficult to know when the flu has escalated to the level of an emergency. Reasons to go to the emergency department for the flu would include vomiting and the inability to keep fluids down, dehydration, shortness of breath, or confusion. In children, worrisome signs include not interacting, having decreased urine output (decreased wet diapers), or being so irritable that they don’t want to be held. It is not necessary to go to the ED for uncomplicated flu with fever, cough, and body aches.”



DeAnn
Champion, M.D.,
Emergency
Department
physician on
staff at
Memorial

like Tamiflu® or Relenza™. Antivirals can reduce the severity of symptoms and shorten the duration of the illness.

Many people turn to alternative therapies like Vitamin C and echinacea to relieve cold and flu symptoms. The Mayo Clinic says “the scientific jury is still out” on these remedies, though there has been some evidence pointing to their effectiveness. Zinc is often used to treat cold symptoms, but be careful not to use an intranasal version. Numerous reports exist of loss of smell associated with these products, and they have since been withdrawn from the U.S. market.



Increasing Security Measures

The first line of defense for preventing any virus, including the common cold, is to wash your hands often and thoroughly with warm water and soap. You should do this every time you shake hands, touch a doorknob, or for that matter, when you touch anything that may be covered in germs. For times when a sink is nowhere to be found, make sure to have some alcohol-based sanitizer or disinfectant wipes on hand.

But even if you are making a concerted effort NOT to touch germ surfaces, you still will. Short of surrendering to life in a Howard Hughes-esque bubble, there is no way of getting around germs touching your hands, especially if you have children or work around them. You can, however, control how often your hands touch your face. Make a serious effort not to touch your mouth, eyes, or nose. If you have an itch that simply won’t go away, resist the urge to scratch it until you can wash your hands.

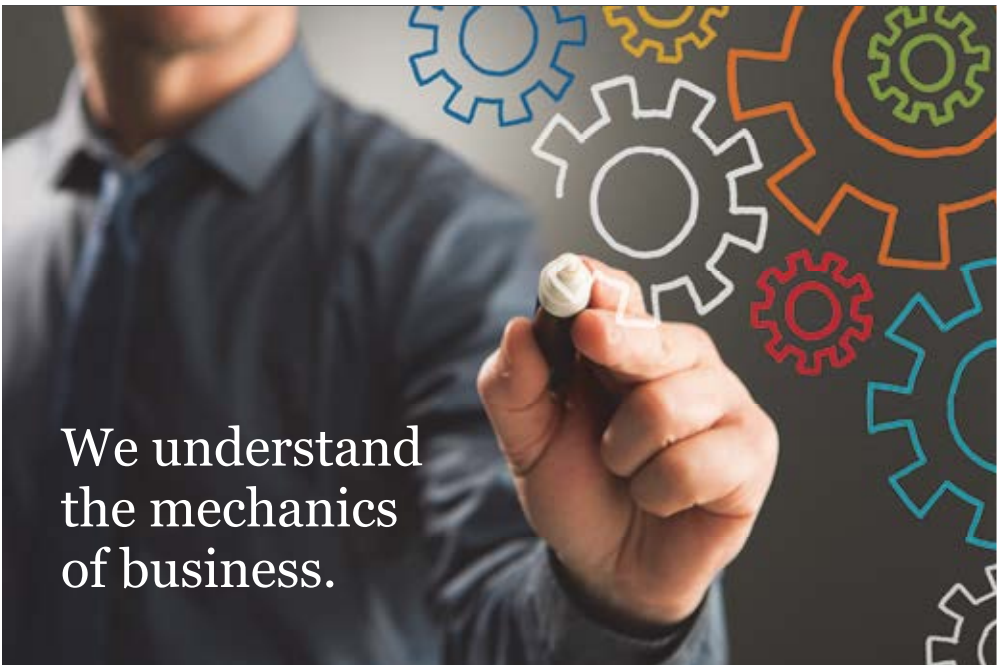
Of course, there is a much easier way to avoid the flu—the flu shot. While there is no guarantee that the shot will

prevent the flu every time, your odds are very good because the formula changes every year in response to the most current viruses. Flu shots are highly recommended for young children, anyone age 65 or over, residents of nursing homes and long-term care facilities, people with compromised immune systems, pregnant women, and health care and daycare workers.

When to See a Doctor

Despite our best efforts, some of us will get a cold, the flu, or both this year. If you do get sick, check your symptoms. Do you have a fever? If so, you should see a doctor as soon as possible to get tested for the flu. If you have it, you can get started on antivirals and get well faster. If you miss the 48-hour window, drink fluids, rest, and treat your symptoms. If your symptoms don’t go away after seven days or if your fever goes over 103°, seek medical attention immediately. You may have developed a complication and need professional help to get well.

Wishing you wellness and a virus-free body this cold and flu season! 📺



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