

View this article online at: [patient.info/common-cold-upper-respiratory-tract-infections](http://patient.info/common-cold-upper-respiratory-tract-infections)

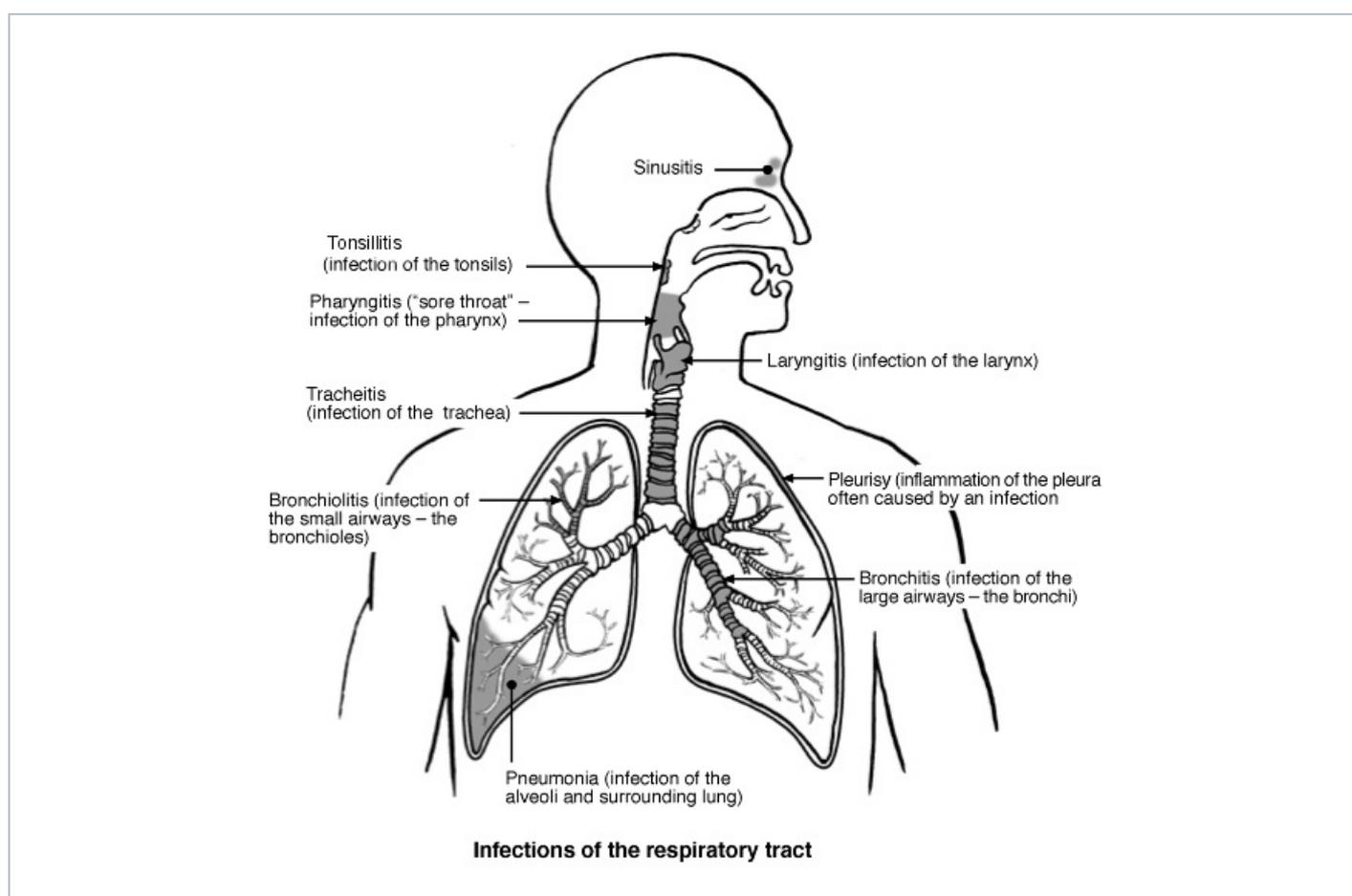
## Common Cold (Upper Respiratory Tract Infections)

The common cold and most upper respiratory infections are caused by infection with germs (viral infections). They usually get better in a week or two. This leaflet gives some tips on what to do and what symptoms to look out for which may indicate a more serious illness.

### What is an upper respiratory tract infection?

A cold is an infection of the nose and upper airways caused by a germ (virus). They are extremely common. An adult can expect 2-4 colds a year and a child can expect about 5-6 colds a year. Very young children in nursery school may get as many as 12 colds a year. Many different viruses can cause a cold. This is why colds come back (recur) and immunisation against colds is not possible.

Infections of the throat (larynx), or the main airway (trachea), or the airways going into the lungs (bronchi) are also common. These infections are sometimes called laryngitis, tracheitis, or bronchitis. Doctors often just use the term upper respiratory tract infection (URTI) to include any, or all, of these infections. Most URIs are due to a viral infection.



The diagram above shows the sites of a range of respiratory infections. This leaflet just deals with the common cold and URIs. See separate leaflets about other infections of the respiratory tract and related structures, called **Bronchiolitis**, **Pneumonia**, **Tonsillitis**, **Sore Throat**, **Acute Sinusitis** and **Pleurisy**. See also separate leaflet called **Coughs and Colds in Children**.

### What are the symptoms of an upper respiratory tract infection?

The common symptoms of a cold are a blocked (congested) nose, a runny nose and sneezing. At first there is a clear discharge (mucus) from the nose. This often becomes thick and yellow/green after 2-3 days. It may be difficult to sleep due to a blocked nose. You may feel generally unwell and tired and you may develop a cough or a mildly high temperature (a mild fever).

In other upper respiratory tract infections (URIs), cough is usually the main symptom. Other symptoms include fever, headache, aches and pains.

Symptoms are typically at their worst after 2-3 days and then gradually clear. However, the cough may carry on after the infection has gone. This is because swelling (inflammation) in the airways, caused by the infection, can take a while to settle. It may take 2-3 weeks, after other symptoms have gone, for a cough to clear completely.

## What is the treatment for an upper respiratory tract infection?

A main aim of treatment for an upper respiratory tract infection (URTI) is to ease symptoms whilst your immune system clears the infection. One or more of the following may be helpful:

- **Taking paracetamol or ibuprofen** to reduce a high temperature (fever) and to ease any aches, pains and headaches. Follow the instructions given with the medicine carefully and do not take more than the advised dose. (Only give these medicines to children under the age of 5 years if they have a fever or appear distressed.)
- **Having plenty to drink** if you have a fever, to prevent mild lack of fluid in the body (dehydration). As long as you do not have a fever, there is no evidence that drinking more fluid than usual makes a difference.
- **If you smoke**, you should try to stop for good. URIs and serious lung diseases tend to last longer in **smokers**.
- **Steam inhalation**. There is not very much evidence that this helps; however, some people find it useful. It is very important to be careful to avoid burns and scalds, particularly with children. A safe way of inhaling steam is to sit in the bathroom with the door closed, while running a hot shower to make the room steamy.
- **Vapour rubs**. Vapour rubs can be bought in pharmacies and supermarkets. Some people find they help with a stuffy nose. Rub the vapour on to the chest and/or back of the person with the cold, but avoid the area under the nose.
- Sucking **sore throat lozenges** (available from pharmacies and supermarkets) or boiled sweets may help ease a sore throat.
- **Warm drinks with honey and lemon** may help to ease a sore throat. (Do not give honey to babies less than 1 year old as it is not known if this is safe.)
- **Salt (saline) nose drops**. These are nose drops made of a salty solution, which may help clear a blocked nose. They are sometimes helpful for babies who are having difficulty breathing through a blocked nose as they feed. They can be bought from a pharmacy.

### What about cold and cough remedies?

You can buy many other cold and cough remedies at pharmacies. These are suitable for adults and older children only. See the information below about giving these remedies to children, and also the separate leaflet [Coughs and Colds in Children](#). These remedies do not help fight the infection but they may be useful for certain symptoms. For example, a decongestant nasal spray may help to clear a blocked nose.

Remember that cold and cough remedies often contain several ingredients. Be careful about taking more than one remedy in case you get too much of one ingredient. (For example some cold remedies contain paracetamol and a decongestant. So if you took that and paracetamol as well, you would be taking excessive amounts of paracetamol, which could be dangerous.)

Some cold and cough remedies may make you drowsy. This may be welcome at bedtime if you have difficulty sleeping because of your cold. However, do not drive if you are drowsy.

If you use a decongestant nasal spray, do not use it for more than a few days. It can have an immediate effect to clear a blocked nose. However, the effect does not last very long. If you use a decongestant nasal spray for more than 5-7 days, you may feel that your nose is becoming more blocked. This is called a rebound effect.

In March 2009 an important statement was issued by the Medicines and Healthcare products Regulatory Agency (MHRA) which says:

*"The new advice is that parents and carers should no longer use over-the-counter (OTC) cough and cold medicines in children under 6. There is no evidence that they work and they can cause side-effects, such as allergic reactions, effects on sleep or hallucinations.*

*"For 6 to 12 year olds these medicines will continue to be available but will only be sold in pharmacies, with clearer advice on the packaging and from the pharmacist. This is because the risk of side-effects is reduced in older children because they weigh more, get fewer colds and can say if the medicine is doing any good. More research is being done by industry on how well these medicines work in children aged 6-12 years."*

**Note:** paracetamol and ibuprofen are not classed as cough and cold medicines and can still be given to children.

### What about antibiotic medicines?

**Antibiotics are not usually advised if you are normally in good health.** Your immune system can usually clear the infection. Antibiotics do not kill germs which are viruses. Even if a different type of germ (called a bacterium) is the cause, antibiotics usually do little to speed up recovery from a URTI.

Antibiotics may even make symptoms worse, as some people develop side-effects such as diarrhoea, feeling sick or a rash. Antibiotics may be prescribed if you become more unwell, or if you already have an underlying (chronic) lung disease. They may also be prescribed if a complication develops, such as **pneumonia** - but this is unlikely to occur if you are otherwise healthy.

### What about supplements and herbal treatments?

Many research studies have been done to try to find something which cures, or prevents, colds. So far there has been no success, although some of the studies are not of good enough quality to be certain. Currently there is **not** any good evidence to suggest that any of the following remedies should be used:

- Garlic
- Vitamin C

- Zinc
- Echinacea
- Chinese herbal remedies

## What symptoms should I look out for?

Most upper respiratory tract infections (URTIs) do not cause complications. A URTI may trigger coughing, wheezing and shortness of breath in **people with asthma** or **other lung diseases**. Sometimes the infection travels to the lung tissue, sinuses, or ears. Germs (bacteria) may thrive in the mucus so some people with colds may go on to develop a **bacterial infection of the lung tissue (pneumonia)**, **ears** or **sinuses**. Therefore, see a doctor if symptoms do not start to ease within two weeks, or if you suspect that a complication is developing. In particular, symptoms to look out for that may mean more than just a URTI include:

- If high temperature (fever), wheezing or headaches become worse or severe.
- If you develop fast breathing, shortness of breath, or chest pains.
- If you cough up blood or if your phlegm (sputum) becomes dark or rusty-coloured.
- If you become drowsy or confused.
- If a cough persists for longer than 3-4 weeks.
- If you have returning (recurring) URTIs.
- If any other symptom develops that you are concerned about.

## Can upper respiratory tract infections be prevented?

Prevention is difficult. Many germs (viruses) can cause an upper respiratory tract infection (URTI). Also, many viruses that cause URTIs are in the air, which you cannot avoid. However, the following are suggestions that may reduce the risk of catching a URTI or of passing one on, if you have one:

- If you have a URTI do not get too close to others - for example, kissing, hugging, etc.
- If you have a URTI, wash your hands often with soap and water. Many viruses are passed on by touch, especially from hands that are contaminated with a virus.
- Avoid sharing towels, flannels, etc, if you have a URTI, or with anyone who has a URTI.
- For children, discourage the sharing of toys belonging to a child with a URTI. If your child has a URTI, consider washing toys with soapy water after use.

Basically, common sense and good hygiene may prevent the passing on of some viruses that cause URTIs.

## Exercise may help too

An interesting research study (see references, below) showed that **people who exercise regularly** are less likely to get URTIs. The study was on 1,002 people over 12 weeks during the winter. It found that the people who exercised on five or more days a week had a much lower chance of developing a URTI compared with those who did little exercise. And, if someone who exercised regularly developed a URTI, there was a good chance that symptoms would be less severe than someone (with a URTI) who did little exercise. The researchers thought this may be because exercise boosted the immune system and this may help us fight infections.

## Further reading & references

- **Common cold**; NICE CKS, August 2016 (UK access only)
- **Over-the-counter cough and cold medicines for children**; Medicines and Healthcare products Regulatory Agency (MHRA), 2009
- **Respiratory tract infections (self-limiting): prescribing antibiotics**; NICE Clinical Guideline (July 2008)
- **Kenealy T, Arroll B**; Antibiotics for the common cold and acute purulent rhinitis. *Cochrane Database Syst Rev.* 2013 Jun 4;6:CD000247. doi: 10.1002/14651858.CD000247.pub3.
- **Nieman DC, Henson DA, Austin MD, et al**; Upper respiratory tract infection is reduced in physically fit and active adults. *Br J Sports Med.* 2010 Nov 1.
- **The Antibiotic Awareness Campaign**; NHS Choices
- **Common Cold Centre**; Cardiff University
- **Karsch-Volk M, Barrett B, Kiefer D, et al**; Echinacea for preventing and treating the common cold. *Cochrane Database Syst Rev.* 2014 Feb 20;2:CD000530. doi: 10.1002/14651858.CD000530.pub3.
- **Hemila H, Chalker E**; Vitamin C for preventing and treating the common cold. *Cochrane Database Syst Rev.* 2013 Jan 31;1:CD000980. doi: 10.1002/14651858.CD000980.pub4.
- **Das RR, Singh M**; Oral zinc for the common cold. *JAMA.* 2014 Apr 9;311(14):1440-1. doi: 10.1001/jama.2014.1404.
- **Wu T, Zhang J, Qiu Y, et al**; Chinese medicinal herbs for the common cold. *Cochrane Database Syst Rev.* 2007 Jan 24;(1):CD004782.
- **Lissiman E, Bhasale AL, Cohen M**; Garlic for the common cold. *Cochrane Database Syst Rev.* 2014 Nov 11;(11):CD006206. doi: 10.1002/14651858.CD006206.pub4.

**Disclaimer:** This article is for information only and should not be used for the diagnosis or treatment of medical conditions. Patient Platform Limited has used all reasonable care in compiling the information but makes no warranty as to its accuracy. Consult a doctor or other healthcare professional for diagnosis and treatment of medical conditions. For details see our [conditions](#).

Author: Dr Mary Harding	Peer Reviewer: Prof Cathy Jackson	
Document ID: 4459 (v42)	Last Checked: 10/11/2016	Next Review: 10/11/2019

View this article online at: [patient.info/common-cold-upper-respiratory-tract-infections](http://patient.info/common-cold-upper-respiratory-tract-infections)

Discuss Common Cold (Upper Respiratory Tract Infections) and find more trusted resources at [Patient](#).

## Ask your doctor about Patient Access

- 🔍 Book appointments
- 🔍 Order repeat prescriptions
- 🔍 View your medical record
- 🔍 Create a personal health record (iOS only)



Simple, quick and convenient.  
Visit [patient.info/patient-access](http://patient.info/patient-access)  
or search 'Patient Access'