



THE COLD HARD TRUTH

A guide to the identification, treatment, and prevention of the common cold.

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The time for sore throats is upon us. The days of coughing, sniffing, sneezing, and body fatigue are closing in fast. It is getting colder, and more people get a cold or the flu during the winter months than any other time. Why is that? Do we catch a cold? If so, should we starve it or feed it? Should we run to the doctor, the pharmacy, or should we wait it out? What role does our immune system play, and is there a way to control it? The purpose of this newsletter is to address some questions surrounding the diagnosis, treatment and prevention of the common cold.

Do I have a cold, flu, or allergies?

Before you can treat a problem, you must correctly identify what the problem is. Below is a table which can help distinguish between three common ailments.

Characteristic	Cold	Influenza	Seasonal Allergies
Chest infection/ cough	Common - mild to moderate	Common - can become severe	Rare
Fever	Rare/mild	High (102-104F)	Not present
Aches and Pains	Mild	Moderate-severe	Rare
Headache	Rare	Common	Rare
Sneezing/red, watery, itchy eyes	Usual - more common in allergies, slow onset	Rare	Usual - especially sneezing, quick onset
Sore Throat	Usual	Occasional	Occasional
Stuffy Nose	Usual	Occasional	Occasional
Fatigue	Mild	Severe	Rare

Myths surrounding colds

Myth #1: Cold weather causes colds.

Fact: The outside weather has nothing to do with catching a cold. There are no more viruses floating around in December than June. The reason more people get sick this time of year is because we spend more time indoors in closer proximity with others who are sick. Cold viruses are actually more active in the spring and fall.

Myth #2: Exposure to someone with a cold guarantees infection.

Fact: Exposure to viruses is not the sole reason for catching a cold. Our bodies are constantly fighting viruses and bacteria, and it is the strength

of our immune system which will determine what amount of germs our body can handle. For example; Suppose someone with a cold sneezes in the face of 10 people. Will they all get sick? The answer is no. It is not the exposure to a virus that makes us sick - it is our body's ability to fight that virus.

Myth #3: Antibiotics can treat a bad cold.

Fact: Antibiotics can only treat bacterial infections and are not effective against viruses that cause the cold or flu.

Myth #4: You are more likely to catch a cold by someone sneezing on you, rather than shaking hands.

Fact: Cold viruses are most commonly spread by hand-to-hand contact, so be sure to wash your hands frequently and thoroughly, especially after having contact with common areas such as doorknobs or public rest-rooms.

Myth #5: A bowl of chicken soup will cure the common cold.

Fact: The warmth of chicken soup may temporarily sooth a scratchy throat, and electrolytes present in the soup aid in illness recovery. However, nothing specific about chicken soup affects your cold. Any warm fluid with electrolytes would have the same effect.

Myth #6: Drinking milk causes more mucus buildup.

Fact: Milk cannot be converted into mucus.

Myth #7: Feed a cold and starve a fever.

Fact: No scientific studies have proven this to be true. Both colds and flus will do better with increasing fluid and nutrient intake.

Cold Remedies: What works, what doesn't, and what can't hurt

It is important to note that there is no cure for the common cold. Treatment is directed at either prevention or symptom relief. The following is a short list of what doesn't work, what works, and what can't hurt.

What Doesn't Work

- Antihistamines:** Although antihistamines can help the runny nose, watery eyes and sneezing that occur with allergies, they have the opposite effect on cold symptoms, further drying nasal membranes and impeding the flow of mucus.
- Over-the-counter (OTC) cough syrups:** The American College of Chest Physicians strongly discourages the use of these medications because they're not effective at treating the underlying cause of cough due to colds. According to the Mayo Clinic, some cough syrups contain ingredients which may alleviate coughing, but most rarely do

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much good, and may actually be harmful for children. In fact, the College of Chest Physicians has strongly recommended against using OTC cough syrups or cold medicines for any child younger than 14.

3. **Tylenol or Aspirin:** In the event of a mild fever, do not reach for the Tylenol. Your body raises its temperature as a natural way to kill viruses. By lowering your temperature with Tylenol, you are treating the symptom, not the cause. You may temporarily feel better, but lowering your temperature will inhibit your body's natural defenses and prolong the sickness.
4. **Decongestants:** Mucus secretions contain dead organisms and nose and throat congestion is your body's attempt to block potential viral passage into the body. As with taking Tylenol for a fever, taking decongestants may provide symptom relief, but they inhibit the body's attempt at fighting the virus, thereby prolonging the illness.
5. **Medical intervention:** Nothing your doctor can prescribe will affect a cold. As mentioned earlier, a cold is caused by a virus, which is unresponsive to antibiotics. However, if you or your child experiences a fever of 103F or higher, or a fever which lasts more than 72 hours, then it is time for a visit. Also, cold symptoms accompanied by vomiting or abdominal pain, severe headache, or difficulty breathing each warrant a trip to the M.D.

What Works:

1. **See the Chiropractor:** Several studies have demonstrated that treatment by a chiropractor can boost the immune system. First, the nervous system plays a major role in the modulation of an immune response. A chiropractor's role is to locate and identify sources of nervous system interference and release or reverse that interference. Second, because many of the immune cells are produced in the spine, some studies have shown that an adjustment by a chiropractor can increase the release of T Lymphocytes (specialized immune cells). Other studies have found those under chiropractic care had higher levels of most immune cells, including T and B Lymphocytes, Natural Killer cells, antibody levels, phagocytes, and plasma beta-endorphins. One visit to the chiropractor will not end a cold, but regular, periodic maintenance care may help to prevent future ones.
2. **Water and other fluids:** You cannot flush a cold out of your system, but drinking plenty of fluids will aid your body in functioning properly, and fighting the virus.
3. **Zinc:** Several studies have proven that taking zinc at the first sign of a cold can decrease the severity and duration. For example, researchers at Dartmouth College gave 35 cold sufferers zinc lozenges to take every two hours, and 35 cold sufferers placebo lozenges to take at the same frequency. The zinc-takers' colds subsided in an average of 4 days, while the placebo group suffered an average of 9 more days. Previous studies which failed to indicate positive results with taking zinc have since been criticized for using zinc which was either inactive or unusable by the body. High quality supplements today are proven effective.

What wouldn't hurt:

1. **Echinacea:** Much dispute over the effectiveness of echinacea has been cited in recent literature. Several double-blinded, placebo con-

trolled studies have shown that echinacea users experience less frequent and less severe colds. However, several other studies question the effectiveness of the supplement. What accounts for the different results? There are nine species of echinacea, only three of which appear to be effective. In fact, these three species are approved in several European countries to treat the common cold. In Germany alone, more than a million prescriptions for echinacea are written each year.

Echinacea should only be taken in two week cycles. Take it a) at the first sign of symptoms, b) when close loved ones or co-workers gets sick, or c) anytime when stress or other life events may weaken the immune system.

2. **Vitamin C:** As with echinacea, both positive and negative results with vitamin C have been demonstrated in research. Vitamin C appears to be most effective when combined with other vitamins such as A, E and B-6. Dosages of 5,000-20,000 mg of vitamin C alone have proven effective, but may cause diarrhea.
3. **Supplements Galore:** Several other natural cold remedies have been suggested, such as Glutamine, Astragalus, Garlic, Goldenseal, Licorice, Peppermint, Allium Cepa, and many others. Before beginning any supplement, it is best to speak with a specialist.

Dr. Fusco's Recommendations

Patients often ask about cold remedies, and many want to know how to prevent and treat a cold. The following is a list of my recommendations, based on research, clinical experience, and what has worked for me.

1. Get chiropractic treatment every few weeks.
2. Our office stocks a supplement called Coryza Forte® which contains many of the above listed vitamins and minerals. Beginning in November, I recommend taking 1/day for two weeks. Take 1/day for two weeks at the beginning of December, January, and February as well. At the first sign of a possible cold, I recommend increasing the dosage to 3/day for one week.
3. In between the two-week cycles of Coryza Forte®, I recommend a zinc supplement, which can be found at local pharmacies. The dosage should be 30-50mg/day.
3. Increase water intake to two liters or more each day.
4. Wash or sanitize hands several times per day. Clean/sanitize common areas throughout the house such as doorknobs or computer keyboards.

The average American adult will catch 3 colds this winter. That number can be reduced by utilizing effective preventative measures which are listed above. Treatment of colds which do occur should be prompt, and designed to decrease the duration of the illness. Treating the symptoms alone may provide temporary relief, but will often prolong the illness.