

## *Viral Infections of the Respiratory Tract*

### 328 THE COMMON COLD

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**DEFINITION.** The common cold, also known as upper respiratory infection (URI) or acute coryza, is an acute, self-limited illness caused by a virus. Nasal symptoms including rhinorrhea and nasal obstruction are invariably present; sore/scratchy throat and/or cough may be present. Many myths surround the source of the virus causing colds. There are no normal viral flora of the respiratory tract in humans (two possible exceptions are human herpesvirus type 6 in saliva and adenovirus, which can be recovered from adenoid tissue of otherwise healthy children by co-cultivation with susceptible cells). In sharp contrast, luxuriant normal bacterial flora occur in the upper respiratory tract and mouth. Because viruses are not part of normal flora, the viruses that cause colds are not present in the host ready to be activated because "resistance" has been lowered by chilling, loss of sleep, or bad diet. Instead, the virus must be *passed* from another human in order to produce the cold.

**TREATMENT.** Given the self-limited nature of colds, any treatment should be completely safe. Antibiotics have no place in therapy of uncomplicated colds, since they neither hasten nor delay recovery from the cold, nor do they reduce the frequency of bacterial complications.

Since the subjective symptoms of a cold disappear in 7 days without intervention, a variety of actually ineffective treatments have been reported to be effective due to inadequate blinding of placebo recipients. **One example of this phenomenon was a study of large doses of vitamin C to prevent colds, in which many placebo recipients dropped out of the study because they could tell by tasting the medication that they were not receiving the vitamin C.** Another example was the use of zinc gluconate lozenges as an antiviral treatment for colds. In the blinded trial, the only appropriate placebo that could be found to match the noxious taste of the zinc was denatonium benzoate, which is so bitter that it has been painted on the thumbs of children to discourage them from thumb-sucking.

No antivirals are currently available for treating colds. Individual symptoms may be treated. Malaise may be relieved by analgesics (e.g., aspirin, acetaminophen, ibuprofen). Nasal congestion may be relieved by decongestants by mouth (pseudoephedrine 60 mg, three times a day) or by topical application (oxymetazoline 0.05%, two sprays to each nostril twice daily). The benefit of oral antihistamines in colds remains controversial.

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