A-A-ACHOO!

is it a cold... or the flu?

You hear them lumped together so frequently that you might think cold and flu is one ailment. To be fair, they do share some symptoms and characteristics – for instance, both are highly contagious infections caused by viruses. There are also a number of distinct differences between colds and influenza.

**The common cold**

A minor infection of the nose and throat, a cold is the No. 1 reason most people see a doctor. (Now you know why it’s called common.) The symptoms usually develop slowly over several days. Recovery time can take anywhere from a few days to a few weeks; however, chronic respiratory conditions like asthma, bronchitis, COPD or emphysema can get worse and continue to flare up long after the cold is gone.

Although having a cold can certainly be miserable, in most cases it’s not a serious illness. Colds can be caused by as many as 200 different strains of virus, which is why it’s virtually impossible to formulate a cold vaccine.

**The fearsome flu**

Influenza is an infectious virus that attacks the respiratory system, primarily the lungs. Flu symptoms come on suddenly, often over several hours. Sufferers usually experience more intense symptoms than those caused by colds and can continue to feel weak for a couple of weeks or even longer. Children, the elderly and people with chronic health problems are at greater risk of serious and even life-threatening complications from the flu, including pneumonia, bronchitis, bacterial infections or worsening of conditions such as asthma, heart disease or diabetes.

There are three types of influenza virus. Because type A and B strains change from year to year and are so contagious, annual flu shots are recommended to protect people from illness and to help head off epidemics. Type C viruses cause a very mild illness that doesn’t require a vaccine.

**Cold, hard facts**

- Americans catch 1 billion colds each year
- Colds cause 22 million lost school days annually
- Most colds occur during fall and winter
- Adults average two to four colds per year
- Women, especially between ages 20 to 30, have more colds than men
- Children average 6-10 colds per year; school-age children can have as many as 12

Together, all the way.
Flu fact check

› 5 to 20 percent of the population – as many as 60 million Americans – suffer from the flu every year
› Flu season typically lasts from October to March, with peak activity occurring most often in February
› More than 200,000 people are hospitalized from flu complications – of those, 20,000 are children younger than 5 years old
› About 36,000 flu victims die yearly

Cold or flu relief

› Get plenty of rest. Limit your activities and contact with others until symptoms improve and you’re no longer contagious (you can spread the flu virus for up to five days after getting sick). Once you feel well enough to resume your normal schedule, take it easy for the first few days.
› Drink lots of fluids for hydration and to help loosen mucus. Try to sip at least eight glasses of water a day; juice, herbal teas and clear soups are also helpful. Avoid caffeine and alcohol, which can dehydrate you.
› Over-the-counter pain relievers and antihistamines, as well as flu preparations that combine the two, can ease the severity of your symptoms but do not treat the viral infection itself.
› Your doctor may prescribe Tamiflu® (in pill or liquid form) or Relenza® (an inhaler) to attack the flu virus. If taken within 48 hours after the first sign of symptoms, these antiviral medications can provide relief and shorten the amount of time you are sick. Although neither drug is a substitute for a flu shot, they may also help prevent getting influenza A or B.
› Use a cool mist vaporizer or saline nasal spray to relieve congestion.
› Soothe a sore throat with throat spray or lozenges, by gargling with warm salt water, or by sucking on ice chips.
› Avoid smoking (or exposure to secondhand smoke), which can make symptoms worse.

Viral infections can sometimes lead to bacterial infections. See your doctor if your illness gets worse, does not improve within 10 days or you show signs of a more serious problem – for example, severe vomiting, high fever, shaking, fainting, shortness of breath, chest pain/pressure, or confusion or disorientation.

Feed a cold, starve a...no, wait...

So, how do you know whether you’ve come down with a cold or the flu? And just as important, how do you properly treat it?

At-a-glance Guide to Symptoms

<table>
<thead>
<tr>
<th>SYMPTOM</th>
<th>COLD</th>
<th>FLU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fever</td>
<td>Low-grade fever, if at all</td>
<td>High fever (101°F or above) for several days</td>
</tr>
<tr>
<td>Cough</td>
<td>A hacking cough, often with mucus</td>
<td>A dry, non-productive cough</td>
</tr>
<tr>
<td>Aches</td>
<td>Mild achingness</td>
<td>Severe body and muscle aches; chest discomfort</td>
</tr>
<tr>
<td>Nose</td>
<td>Sneezing; runny or stuffy nose, often with thick discharge</td>
<td>Stiffness</td>
</tr>
<tr>
<td>Chills</td>
<td>Not usually</td>
<td>Chills and sweats</td>
</tr>
<tr>
<td>Fatigue</td>
<td>Fairly mild</td>
<td>Extreme tiredness, lack of energy</td>
</tr>
<tr>
<td>Headache</td>
<td>Mild</td>
<td>Moderate to severe</td>
</tr>
<tr>
<td>Throat</td>
<td>Sore, scratchy throat</td>
<td>Not usually affected</td>
</tr>
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Important drug warnings

Because of the risk of Reye’s syndrome, a rare but potentially fatal illness, never give aspirin or drugs containing salicylates to children or teens. In addition, some OTC pain or cold remedies should be avoided by people with certain chronic health conditions. Always check drug labels for ingredients and warnings, and consult your doctor or pharmacist before taking a new medication.

What about antibiotics?

Using antibiotics won’t stop a cold or flu, and it won’t treat them either. Because antibiotics aren’t effective against viruses and will not prevent bacterial infections, they should only be prescribed if a bacterial infection develops.
**“Prescription” for staying healthy**

A cold or flu virus is typically spread in droplets that are released when a person talks, coughs or sneezes. Consider what happens when someone who has the flu sneezes onto their hands and then touches the telephone, the computer keyboard or a kitchen glass. The germs can live for hours – in some cases weeks – only to be passed on to the next person who touches the same object.

While it may be impossible to avoid exposure entirely, these tips will go a long way toward increasing your chances of a cold- and flu-free season:

› Get an annual flu shot, especially if you’re in a high-risk group.
› Wash your hands frequently; for convenience, keep a waterless hand sanitizer in your car or at your desk.
› Cold and flu viruses enter your body through the eyes, nose, or mouth, so avoid touching your face.
› Don’t cover sneezes and coughs with your hands – use tissues and dispose of them immediately. If none are handy, turn your head away from people near you and shield your nose and mouth with the crook of your elbow.
› Temporarily use disposable items if someone in your family is infected.
› Clean kitchen and bathroom surfaces and commonly used household items (TV remote, telephone, toys, doorknobs, stair rails) with a germ-killing disinfectant.
› Use paper towels for hand washing, or have separate towels for each family member and provide a clean one for guests.

In addition, help your body put up a strong fight by boosting your immune system:

› Get at least 7 hours of sleep a night.
› Drink plenty of fluids, including at least eight glasses of water daily. Water flushes out toxins as it rehydrates you. If the color of your urine runs close to clear, you’re getting enough liquid.
› A regular dose of fresh air is important, especially in cold weather when central heating dries you out and makes your body more vulnerable to viruses. Also, more people stay indoors in winter, which means more germs are circulating in crowded, dry rooms.
› Regular aerobic exercise speeds up the heart to pump more blood, makes you breathe faster to help transfer oxygen from your lungs to your blood, and makes you sweat once your body heats up – all of which help increase the body’s natural virus-killing cells.
› Load up on the phytochemicals in deeply colored fruits and vegetables (grapes, berries, citrus, tomatoes, peppers, broccoli, leafy greens), plus whole grains, beans and soy. In addition to stimulating immunity against diseases, these natural compounds have antiviral and antibacterial qualities.
› Statistics show that heavy smokers get more severe colds and more frequent ones. Even being exposed to smoke profoundly zaps the immune system.
› Alcohol dehydrates the body; it actually takes more fluids from your system than it puts in. Heavy alcohol use compromises the liver, the body’s primary filtering system, making heavier drinkers more prone to initial infections as well as complications.
› Unrelieved stress can weaken your immune system. Practice stress management techniques and be sure to schedule time for relaxation.

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**Soup’s on...**

Mom’s chicken soup has comforted cold and flu sufferers for generations. Results of a University of Nebraska study showed this beloved home remedy may actually have medicinal value. A homemade family recipe and some of the canned soups tested limited the movement of *neutrophils* – white blood cells that fight infections but can also stimulate mucus production. Researchers explained that, along with soothing coughs and clearing stuffy noses, the ingredients in chicken soup appear to have an anti-inflammatory effect on upper respiratory infections.
Getting the “Flu Shot”

Flu season can begin as early as September and last as late as May. Getting vaccinated during the recommended months of October or November enables you to develop immunity before flu activity is in full swing; however, you can be immunized in December or even later in the season. Regardless when you receive the vaccine, you should be protected through the entire influenza season. Early each year, scientists prepare vaccines using three influenza strains that are in circulation and that are expected to be circulating the following fall and winter. The vaccine prevents influenza by causing protective antibodies to develop in your body.

Currently, there are two vaccine options, neither of which causes you to get the flu:

› People who get an injection in the arm receive an inactivated vaccine containing killed influenza virus. This type of flu shot is approved for people older than 6 months, including both healthy people and those with chronic medical conditions.

› FluMist®, a nasal-spray vaccine, is made with live, weakened flu viruses. Sometimes called LAIV for “live attenuated influenza vaccine,” FluMist is approved only for healthy people ages 2 to 49 who are not pregnant.

Who should get a flu shot?

With the exceptions noted below, anyone who wants to reduce their chances of getting the flu can get vaccinated. In particular, people who are at high risk for complications from the flu should be immunized, including:

› Children ages 6 months through 18 years
› Pregnant women
› People 50 years of age and older
› People of any age with a suppressed immune system or certain chronic medical conditions (especially asthma and other lung diseases, heart disease, kidney disease and diabetes)
› People who live in nursing homes and other long-term care facilities
› Household members and other caregivers for babies younger than 6 months and other people at increased influenza risk

Who should not get a flu shot?

Influenza vaccine is not approved for use in infants less than 6 months of age. People who have a moderate or severe illness with a fever should put off immunization until their symptoms lessen.

Do not get vaccinated without first consulting a physician if you:

› Have a severe allergy to chicken eggs (the viruses in the vaccine are grown in eggs)
› Have had a severe reaction to an influenza vaccination in the past
› Have a history of the nerve disease Guillain-Barré syndrome

Flu shot myths

The flu shot can give you the flu

The vaccine cannot cause the flu because it’s made from virus strains that are no longer active. Of course, no vaccine is 100 percent foolproof. If you do come down with the flu after being vaccinated – most likely because you were exposed to the virus before receiving the shot or you’ve been infected by a new strain – you'll usually have a much milder case. The vaccine does not protect you from other viruses that sometimes feel like the flu.

The side effects of the vaccine are worse than the flu

The most common side effect you’re likely to get from a flu shot is a sore arm within a day or two after injection. As long as all precautions are followed, the risk of a rare allergic reaction to the vaccine is far less than the risk of developing severe complications from influenza.

Only older people need the flu vaccine

Most deaths from flu or its complications occur to people over age 65. Even so, many people are susceptible to serious health complications caused by the flu. Doctors recommend that children between the ages of 6 months and 18 years get immunized. In addition, adults and children alike who have chronic health conditions like asthma, diabetes, heart disease and kidney disease are strongly recommended to get a flu shot.