

Home Care Advice for Influenza

1. Reassurance

- For healthy people, the symptoms of influenza are similar to those of a bad cold.
- With flu, however, the onset is more abrupt and the symptoms are more severe.
- Feeling very sick for the first 3-4 days is common.
- The treatment of influenza depends on your child's main symptoms and is not different from what is used for other viral respiratory infections.
- Strict bed rest is not necessary.

2. Runny Nose with Profuse Discharge: Blow or Suction the Nose

- Reassure the patient that the nasal mucus and discharge is **washing viruses and bacteria out of the nose and sinuses.**
- Blowing the nose is all that's needed. For younger children, use nasal suction. Use "Cold Care" nasal tissues, or apply petroleum jelly to the nasal openings to protect them from irritation (Cleanse the skin first.)

3. Nasal Washes for Blocked Nose

- Use warm water or saline nose drops to loosen up the dried mucus, followed by blowing or suctioning the nose. Instill 2-3 drops or sprays (depending on age) in each nostril. Repeat nose drops until clear. Do nasal washes at least 4 times per day or whenever your child can't breathe through the nose.
 - Reason for nose drops: suction alone can't remove dried or sticky mucus.
 - Caution: if younger than 1 year, use 2 drops at a time and do 1 side at a time.
 - Saline Nose Drops: Add a half teaspoon of table salt to 1 cup (8 oz) of warm water.
 - Importance: A young infant can't nurse or drink from a bottle unless the nose is open.

4. Cold Medicines

- **Cold medicines are not recommended at any age.** (Reason: they are not helpful. They sludge up mucous on the nose and respiratory passages. Nasal washes are more helpful.)
- ANTIHISTAMINES are **not** helpful, unless your child also has nasal allergies.
- DECONGESTANTS: Over-the-counter oral decongestants (pseudoephedrine or phenylephrine) are **not** recommended. Although they may reduce nasal congestion in some children, they also can have significant side effects.
- AGE LIMIT: **Before 4 years, never use any cold medicines** (Reason: unsafe and not approved by Food and Drug Administration). After 4 years, we don't recommend them, but if the parent insists on using one, please refer to the appropriate drug dosage tables. (**Avoid multi-ingredient products.**)
- NO ANTIBIOTICS: **Antibiotics are not helpful** unless your child develops an ear or a sinus infection.

5. Homemade Cough Medicine

- **The best thing to keep mucous moving out of the body is plenty of WATER!!**
- **Before 1 year of age**, only use warm clear fluids (eg, water, apple juice) to treat the cough "tickle". Dosage: 1-3 teaspoons (5-15 mL) when coughing. **Avoid honey.**
- **After 1 year of age**, use HONEY ½ -1 teaspoon (2-5 mL) as needed as a homemade cough medicine. It can thin the secretions and loosen the cough. (If not available, can use sucrose.)
- **After 6 years of age**, use COUGH DROPS to coat the irritated throat (now made with honey.) If not available, can use hard candy.
- Sweet warm honey lemonade is useful at bedtime. (12 oz warm water, fresh squeezed lemon, sweeten with honey to taste.) Amount as appropriate for child's age and size. Do not use less than 1 year of age.

6. **Sore Throat Relief:** For mild sore throat, give warm chicken broth older than 1 year, and consider honey based cough drops if older than 6 years. Gargling with salt water is useful in older children.
7. **Fever Medicine**
 - For fever >102°F (39°C) or discomfort, use acetaminophen (eg, Tylenol) or ibuprofen (eg, Advil) (See Dosage table on FCMGI website.)
 - AVOID ASPIRIN because of the strong link with Reye syndrome.
 - FOR ALL FEVERS: **Give cold fluids in unlimited amounts.** Avoid excessive clothing or blankets (bundling.)
8. **Pain Medicine:** For pain relief (eg, muscle aches, sore throat), give acetaminophen every 4 hours OR ibuprofen every 6 hours as needed (See Dosage table on FCMGI website.)
9. **Humidifier:** If the air in your home is dry, use a humidifier. Moist air keeps the nasal mucus from drying up.
10. **Contagiousness**
 - Spread is rapid because the incubation period is only 24-36 hours and the virus is very contagious.
 - Your child can return to child care or school after the fever is gone and your child feels well enough to participate in normal activities.
 - For practical purposes, the spread of influenza cannot be prevented.
11. **Expected Course:**
 - The fever lasts 3-5 days
 - The runny nose 7-14 days
 - The cough 2-4 weeks
12. **Prescription Antiviral Medication for Influenza**
 - All antiviral drugs must-be started within 48 hours of the onset of influenza symptoms to have an impact.
 - Their benefits are limited; they only reduce the duration of symptoms by 1-1.5 days. *They* do not cure the disease nor remove all the symptoms.
 - The AAP recommends they be used for HIGH-RISK children.
 - Tamiflu is not approved if younger than 1 year.
 - Pediatricians vary in their opinion about the value of prescribing antiviral drugs for HEALTHY children with influenza.

✓ **Our office policy is:** Tamiflu is to be prescribed only after an examination. Tamiflu is reserved for those who are high risk or severely ill, and only at the discretion of the health care provider.
13. **Call back if:**
 - Fever lasts >5 days
 - Fever goes away >24 hours and then returns
 - Nasal discharge lasts > 14 days
 - Deep cough lasts >3 weeks
 - Your child becomes worse