

Symptomatic management

This pad is to assist GPs to advise symptomatic management for patients whose symptoms suggest a respiratory tract illness where antibiotic treatment will have little or no benefit.

- **Acute upper respiratory tract infections**
 - common cold, sore throat, bacterial sinusitis and otitis media
- **Acute bronchitis**

For pain

Paracetamol*

ADULTS: 0.5–1 g every 3–6 hours when necessary; maximum 4 g daily **OR** 2 x 665 mg controlled-release tablets swallowed whole every 6–8 hours when necessary; maximum 6 tablets (3990 mg) daily.

CHILDREN: For acute use – 15 mg/kg every 4–6 hours. In an unsupervised community setting, limit dosage to 60 mg/kg daily for up to 48 hours; up to 90 mg/kg daily can be used in children > 3 months old under medical supervision with review after 48 hours; single dose of 30 mg/kg may be used for night-time dosing. Check which paediatric product the child is being given before calculating dose.

Ibuprofen*

ADULTS: 200–400 mg 3 or 4 times a day up to 2400 mg daily. (N.B. Maximum recommended OTC dose is 1200 mg daily.)

CHILDREN: > 6 months 5–10 mg/kg/dose 3 or 4 times a day. In children ≥ 30 kg, do not exceed 1200 mg daily. Check which paediatric product the child is being given before calculating dose.

Aspirin*

ADULTS: 300–900 mg every 4–6 hours when necessary.

Throat lozenges/gargles/spray

Preparations for symptomatic relief in adults or children over 12 years often contain anaesthetic, antiseptic and/or anti-inflammatory agents. A significant placebo effect has been reported for topical products.

For nasal congestion

Saline nasal drops or spray*

Used to thin mucosal secretions. Use in preference to topical decongestants† especially in children to avoid risk of rebound congestion or CNS effects.

Steam inhalations

Caution patients on the risk of burns. Not recommended for use in children.

Decongestants*

†**Topical decongestants:** Avoid use in infants < 6 months as rebound congestion may cause breathing difficulty. CNS effects are more common in children.

Pseudoephedrine: Only 3 days supply at adult doses available without a prescription (to reduce the risk of diversion for illicit purposes). ADULTS: 60 mg every 4–6 hours; maximum 240 mg daily. CHILDREN: > 2 years, 1 mg/kg 3–4 times a day.

Phenylephrine HCl: (sympathomimetic agent) There is a scarcity of good quality published clinical trials demonstrating significant relief of nasal congestion with oral phenylephrine HCl.

For cough during a cold

Cough products*

Avoid irrational combination products containing a cough suppressant and an expectorant.

Clinical efficacy of cough suppressants and expectorants is not established, but may provide placebo effect in some people. There is no evidence for efficacy of cough suppressants in cough due to viral URTIs. Dextromethorphan may be the preferred agent due to a low incidence of CNS effects and less risk of dependence. Avoid use in children (lack of proven antitussive effect and potential adverse effects).

Further information

**Australian Medicines Handbook* 2006, Australian Medicines Handbook Pty Ltd.

Patient name: _____ Date: _____ / _____ / _____

These treatments will help you (or your child) feel better while the body's own defences defeat the respiratory tract illness

Tick <input checked="" type="checkbox"/> where appropriate	Dosage and other advice
<input type="checkbox"/> Paracetamol or ibuprofen (or adults may take aspirin)	_____
<input type="checkbox"/> Ice, throat lozenges, gargles or sprays	_____
<input type="checkbox"/> Saline nasal drops or spray	_____
<input type="checkbox"/> Steam inhalations	_____
<input type="checkbox"/> A decongestant spray or drops	_____
<input type="checkbox"/> A decongestant tablet or mixture	_____
<input type="checkbox"/> Rest	_____
<input type="checkbox"/> Maintain adequate fluid intake	_____
<input type="checkbox"/> Other	_____ _____

- All the medicines recommended can be purchased from your local pharmacy.
- Use medicines as directed by your doctor or pharmacist, or follow the directions on the package.
- Stop taking the medicines when you feel better.

Follow up

- Contact your doctor if you don't feel better after a few days, if your symptoms worsen, if new symptoms develop or if you have other concerns.
- Contact your doctor if any other condition you suffer from becomes worse (e.g. asthma or diabetes)
- Other: _____

Signature: _____

Practice stamp:

You won't get better quicker by taking antibiotics for colds, most coughs and most sore throats

- Most colds, sore throats and bronchitis are caused by viruses; antibiotics can not kill these.
- Antibiotics may cause unwanted effects like stomach upsets, diarrhoea and thrush.
- Antibiotics will not help a cold get better faster, stop a cold from getting worse or stop an infection spreading to other people.
- Using antibiotics when they are not needed may make them less effective when they are needed.

Instead of taking an antibiotic

You or your child should:

- Get plenty of **rest** to help the body's immune system fight off the virus.
- Maintain an adequate **fluid** intake. Healthy young adults should drink 7–8 glasses of fluid (water or juice) each day. Encourage children to drink their usual amount of fluids.
- **Avoid smoking** or exposure to cigarette smoke.

Some medicines may help you or your child feel better

Some medicines used to relieve cold symptoms should not be taken by people with particular medical conditions, by people who are also taking certain other medicines, by the young or elderly, during pregnancy or when breast feeding.

To choose the best medicine for you, always read the label and ask your doctor or pharmacist for help.

To soothe a sore throat

- **Paracetamol, ibuprofen or aspirin** may be helpful. Some people cannot use these medicines.
- Some adults and older children may find it soothing to gargle warm salty water, or to suck on ice or a throat lozenge.

To clear mucus, relieve blocked sinuses or dry a runny nose

- **Saline (salty water)** nasal sprays or drops can help clear mucus.
- **Steam inhalations** help clear mucus from blocked sinuses. **Children should not breathe in steam from a bowl of hot water** – there is a risk of accidents and steam can burn the lining of their nose.
- **A decongestant** may help 'dry' a runny nose or relieve blocked sinuses. Decongestant spray or drops should be used for no more than a few days.

Contact your doctor...

If you or your child develop any of the following:

- temperature higher than 38.5°C or chills
- neck stiffness
- severe headache
- light hurting the eyes
- chest pain
- shortness of breath, noisy or fast breathing or difficulty breathing
- skin rash
- pale or mottled skin
- vomiting
- difficulty waking up or unusual drowsiness
- persistent cough
- aching muscles.

If your child or baby has any of the following:

- bulging of the fontanelle (soft spot on top of the baby's head)
- a high temperature (in babies under 6 months of age)
- excessive irritability
- a strange, high-pitched cry
- lack of energy
- loss of appetite, not drinking, feeding poorly
- earache.