
Health Tips Newsletter - January 24, 2008

FDA Issues Warning about Cold Medicines for Children

January 17th, 2008

"FDA Recommends that Over-the-Counter (OTC) Cough and Cold Products not be used for Infants and Children under 2 Years of Age. FDA is recommending that these drugs not be used to treat infants and children under 2 years of age because serious and potentially life-threatening side effects can occur.

"FDA has not completed its review of information about the safety of OTC cough and cold medicines in children 2 through 11 years of age. We are aware of reports of serious side effects from cough and cold medicines in children 2 years of age and older."

www.fda.gov/cder/drug/advisory/cough_cold_2008.htm

Wow. We are the middle of cough and cold season and all our infant and toddler drugs are off the shelves. What do we do? Read on...

Associate Director of FDA's Pediatric and Maternal Health Director Cautions Parents

Lisa Mathis, MD, associate director of the FDA's Pediatric and Maternal Health Staff in the Office of New Drugs, reminds parents that the FDA hasn't finished reviewing cough and cold drugs for older children. They become safer as age and weight increase, but the FDA may well recommend pulling drugs for kids all the way up to age 11 when they finish those reviews.



Mathis provided the following reminder to parents who choose to give over-the-counter cough and cold medicines to children aged 2-11: "Always remember that these medications do not cure the cold. They don't shorten the time that your child has a cold, and they're only meant to help a child's symptoms."

Is the FDA Overreacting? Really, how bad is it?

It depends. How many ER visits is too many? If the drugs don't really do any good, then the answer is one.

Evidence about Cold Medications' (In)effectiveness

Systematic reviews of controlled trials of over-the-counter cough and cold medications have concluded they are not more effective than placebos in reducing acute cough¹ and other symptoms of upper respiratory tract infection².

The American Academy of Pediatrics and American College of Chest Physicians Recommendations

Because of the unproven efficacy of the cough suppressants codeine and dextromethorphan in young children and the potential for adverse events, in 1997 the American Academy of Pediatrics issued a policy statement advising that parents should be educated regarding the lack of antitussive effects, risk for adverse events, and potential for overdose in children from these medications³.

In 2006, the American College of Chest Physicians released clinical practice guidelines for management of cough, advising health-care providers to refrain from recommending cough suppressants and other over-the-counter cough medications for young children because of associated morbidity and mortality⁴.

Since Cold Medicines are Potentially Dangerous, Here's What Should We Do When Our Children get Colds

- **Use saline nose drops to thin our children's mucus.** Researchers have found that rinsing with warm water and 2% saline not only clears up sinus symptoms associated with cold and flu, allergies and sinusitis on a long-term basis, it is proven to improve overall quality of life in patients with sinus symptoms⁵.

Sea salt is preferable, but not necessary. Salt without iodine should be used. Never use nonprescription nose drops that contain any medicine⁶. Avoid Hypertonic saline, as it is more likely to burn your nasal passages.



A recent study shows that saline nasal sprays significantly lessens sore throats, coughs, and nasal obstructions and results in fewer days of illness and missed school⁷.

- **Clear your baby's nose with a suction bulb.**
- **Use a humidifier in your child's room.** This helps to moisten the air and clear your child's nasal passages. Be sure to clean the humidifier often⁶!
- **Administer Fluids, vitamin C, and Zinc.** Zinc works to strengthen cells. Recommendations for zinc while sick are 50 mg per day for K-5th grade, 60 mg for 6th grade through age 16, and 100 for adults. Zinc gluconate lozenges have been shown to shorten the duration of symptoms by 42%⁸. Two or three 13 mg lozenges would be safe in kids over 2.
- **See Your Chiropractor for an Adjustment!** (Would I write this list without this recommendation?) Chiropractic has been shown to boost your immune system. Some of the studies are cited in the next section, so read on!

Chiropractic Boosts Your Immune System

In reviewing the studies attempting to measure the effect of chiropractic treatment on the immune system, the results suggest that chiropractic treatment may influence T and B lymphocyte numbers, NK cell numbers, antibody levels, phagocytic activity and plasma beta-endorphin levels.⁹

In other words, these studies suggest that chiropractic treatment stimulates an immune system response. In fact, chiropractic was credited with great success in treating people during the nationwide flu epidemic of 1917.^{10, 11}



We've seen that "phagocytic respiratory burst of polymorphnuclear neutrophils (PMN) and monocytes were enhanced in adults that had been adjusted by chiropractors."¹² In other words, the cells that act like "Pac-Man" eating and destroying bad cells are enhanced through chiropractic care.

Another important study was performed at the Sid E. Williams Research Center of Life Chiropractic University. The researchers took a group of HIV positive patients and adjusted them over a six-month period. What they found was that the "patients that were adjusted had an increase of forty-eight percent (48%) in the CD4 cells (an important immune system component)."

These measurements were taken at the patients' independent medical center, where they were under medical supervision for the condition. The control group (the patients that were not adjusted) did not demonstrate this dramatic increase in immune function, but actually experienced a 7.96% decrease in CD4 cell counts over the same period¹³.

Several studies have shown chiropractic to not only affect white cell counts for the short term, but to affect overall immune system function positively^{14,15,16}.

Chiropractic is (of course) Safe for All Ages

Parents who have never watched me treat a child might be thinking, "Oh, no way! The force he uses to get my mid back to move would turn my precious baby into mush." Yeah, it would. That's why I use so much less force than you, the parent, may not even realize I'm doing anything but holding your child. It's not a life long weekly commitment, either. Many parents are surprised when I check their child and say that they don't need treatment that day. I find that regular check-ups for the first few months gives children a real boost in function.

So, give their little spines a treat and bring them with you for your next appointment. Lingering issues may be resolved, colds will clear up faster, and you'll feel better knowing that you've helped them feel better without resorting to drugs that have been shown to be dangerous.

Humor - Just in Time for the Big Game

Three quarterbacks, Peyton Manning, Tony Romo and Tom Brady, go to heaven to visit God and watch the Celtics play a game. God decides who will sit next to him by asking the boys a question... God asks Peyton Manning first: "What do you believe?"

Peyton thinks long and hard, looks God in the eye, and says, "I believe in hard work, and in staying true to family and friends. I believe in giving. I was lucky, but I always tried to do right by my fans."

God can't help but see the essential goodness of Manning, and offers him a seat to his left.

Next God turns to Tony Romo and says, "What do you believe?"

Tony says, "I believe passion, discipline, courage and honor are the fundamentals of life. I, too, have been



lucky, but win or lose, I've always tried to be a true sportsman, both on and off the playing fields."

God is greatly moved by Tony's sincere eloquence, and he offers him a seat to his right.

Finally, God turns to Tom Brady: "And you, Tom, what do you believe?"

Tom replies, "I believe you're in my seat."

Thanks for reading. Call me for an appointment today; your body will thank you for it!

Dr Matt Waln



References

1. Schroeder K, Fahey T. Over-the-counter medications for acute cough in children and adults in ambulatory settings. *Cochrane Database Syst Rev* 2004(4):CD001831.
www.fda.gov/cder/drug/advisory/cough_cold_2008.htm
2. Smith MB, Feldman W. Over-the-counter cold medications. A critical review of clinical trials between 1950 and 1991. *JAMA* 1993;269: 2258--63.
3. Use of codeine- and dextromethorphan-containing cough remedies in children. American Academy of Pediatrics. Committee on Drugs. *Pediatrics* 1997;99:918--20.
4. Irwin RS, Baumann MH, Bolser DC, et al. Diagnosis and management of cough executive summary: ACCP evidence-based clinical practice guidelines. *Chest* 2006 Jan;129(1 Suppl):1S--23S.
5. Effect of saline solution on nasal mucociliary clearance and nasal airway patency. *Otolaryngology - Head and Neck Surgery*, Volume 131, Issue 2, Pages P240-P241 B. Keojampa presenter, M. Nguyen, M. Ryan
6. *Common Childhood Infections* (Copyright © 2005 American Academy of Pediatrics)
7. *Archives of Otolaryngol Head Neck Surg.* 2008;134[1]:67-74.
8. *Annals of Internal Medicine* 15 July 1996 | Volume 125 Issue 2 | Pages 81-88 Zinc Gluconate Lozenges for Treating the Common Cold
9. *Chiropractic Journal of Australia* 1993 Sep;23(3):132-5
10. Smith, KR. "One hundred thousand cases of influenza with a death rate of one-fortieth of that officially reported under conventional medical treatment." Annual Convention of the American Association of Clinical Research, New York. Oct. 18, 1919. *Journal of the American Osteopathic Association*. January, 1920. Special Reprints. *Journal of the American Osteopathic Association*. Vol. 100. No. 5. May 2000.
11. Patterson, M. "Osteopathic methods and the great flu pandemic of 1917-1918." *The Journal of the American Osteopathic Association* May 2000; 100(5):309-10
12. Brennan P, Graham M, Triano J, Hondras M. "Enhanced phagocytic cell respiratory bursts induced by spinal manipulation: Potential Role of Substance P." *Journal of Manipulative & Physiological Therapeutics* 1991; (14)7:399-400.
13. Selano JL, Hightower BC, Pflieger B, Feeley-Collins K, Grostic JD. "The Effects of Specific Upper Cervical Adjustments on the CD4 Counts of HIV Positive Patients." *The Chiropractic Research Journal*; 3(1); 1994.
14. Pero R. "Medical Researcher Excited By CBSRF Project Results." *The Chiropractic Journal*, August 1989; 32.
15. Brennan PC, Kokjohn K, Kaltinger CJ, Lohr GE, Glendening C, Hondras MA, McGregor M, Triano JJ "Enhanced Phagocytic Cell Respiratory Burst Induced by Spinal Manipulation: Potential Role of Substance P" *Journal of Manipulative & Physiological Therapeutics* 1991; 14(7): 399-407.
16. Kessinger R "Changes in Pulmonary Function Associated with Upper Cervical Specific Chiropractic Care" *Journal of Vertebral Subluxation Research*. 1997;1(3): 43-49.