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## Health Issues

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### Children and Colds

## My child seems to get a lot of colds. Is this normal?

Your child probably will have more colds, or upper respiratory infections, than any other illness. In the first two years of life alone, most youngsters have eight to ten colds. And if your child is in child care, or if there are older school-age children in your house, she may have even more, since colds spread easily among children who are in close contact with one another. That's the bad news, but there is some good news, too: Most colds go away by themselves and do not lead to anything worse.



### How colds spread

Colds are caused by viruses, which are extremely small infectious organisms (much smaller than bacteria). A sneeze or a cough may directly transfer a virus from one person to another. The virus also may be spread indirectly, in the following manner.

1. A child or adult infected with the virus will, in coughing, sneezing, or touching her nose, transfer some of the virus particles onto her hand.
2. She then touches the hand of a healthy person.
3. This healthy person touches her newly contaminated hand to her own nose, thus introducing the infectious agent to a place where it can multiply and grow—the nose or throat. Symptoms of a cold soon develop.
4. The cycle then repeats itself, with the virus being transferred from this newly infected child or adult to the next susceptible one, and so on.

### Signs and symptoms of a cold

Once the virus is present and multiplying, your child will develop the familiar symptoms and signs:

- Runny nose (first, a clear discharge; later, a thicker, often colored one)
- Sneezing
- Mild fever (101–102 degrees Fahrenheit [38.3–38.9 degrees Celsius]), particularly in the evening
- Decreased appetite
- Sore throat and, perhaps, difficulty swallowing
- Cough
- On-and-off irritability
- Slightly swollen glands
- Pus on the tonsils, especially in children three years and older, may indicate a strep infection.

If your child has a typical cold without complications, the symptoms should disappear gradually after seven to ten days.

### Treatment



An older child with a cold usually doesn't need to see a doctor unless the condition becomes more serious. If she is three months or younger, however, call the pediatrician at the first sign of illness. With a young baby, symptoms can be misleading, and colds can quickly develop into more serious ailments, such as bronchiolitis, croup, or pneumonia. For a child older than three months, call the pediatrician if:

- The nostrils are widening with each breath, the skin above or below the ribs sucks in with each breath (retractions), or your child is breathing rapidly or having any difficulty breathing.
- The lips or nails turn blue.
- Nasal mucus persists for longer than ten to fourteen days.
- The cough just won't go away (it lasts more than one week).
- She has pain in her ear.
- Her temperature is over 102 degrees Fahrenheit (38.9 degrees Celsius).
- She is excessively sleepy or cranky.

Your pediatrician may want to see your child, or he may ask you to watch her closely and report back if she doesn't improve each day and is not completely recovered within one week from the start of her illness.

Unfortunately, there's no cure for the common cold. Antibiotics may be used to combat bacterial infections, but they have no effect on viruses, so the best you can do is to make your child comfortable. Make sure she gets extra rest and drinks increased amounts of fluids.

If she has a fever and is very uncomfortable, give her single-ingredient acetaminophen or ibuprofen. Ibuprofen is approved for use in children six months of age and older; however, it should never be given to children who are dehydrated or who are vomiting repeatedly. (Be sure to follow the recommended dosage for your child's age and the time interval for repeated doses.)

It's important to note, though, that over-the-counter (OTC) cough and cold medicines should not be given to infants and children under two years old because of the risk of life-threatening side effects. Also, several studies show that cold and cough products don't work in children younger than six years and can have potentially serious side effects. In addition, keep in mind that coughing clears mucus from the lower part of the respiratory tract, and ordinarily there's no reason to suppress it.

If your infant is having trouble breathing or drinking because of nasal congestion, clear her nose with saline (salt water) nose drops or spray, which are available without a prescription. This can then be followed by suction with a rubber suction bulb every few hours or before each feeding or before bed. For the nose drops, use a dropper that has been cleaned with soap and water and rinsed well with plain water. Place two drops in each nostril fifteen to twenty minutes before feeding, and then immediately suction with the bulb. Never use nose drops that contain any medication, since excessive amounts can be absorbed. Only use normal saline nose drops.

When using the suction bulb, remember to squeeze the bulb part of the syringe first, gently stick the rubber tip into one nostril, and then slowly release the bulb. This slight amount of suction will draw the clogged mucus out of the nose and should allow her to breathe and suck at the same time once again. You'll find that this technique works best when your baby is under six months of age. As she gets older, she'll fight the bulb, making it difficult to suction the mucus, but the saline drops will still be effective.

Placing a cool-mist humidifier (vaporizer) in your child's room also will help keep nasal secretions more liquid and make her more comfortable. Set it close to her (but safely beyond her reach) so that she gets the full benefit of the additional moisture. Be sure to clean and dry the humidifier thoroughly each day to prevent bacterial or mold contamination. *Hot-water vaporizers are not recommended since they can cause serious scalds or burns.*

## Prevention

If your baby is under three months old, the best prevention against colds is to keep her away from people who have them. This is especially true during the winter, when many of the viruses that cause colds are circulating in larger numbers. A virus that causes a mild illness in an older child or an adult can cause a more serious one in an infant.

If your child is in child care and has a cold, instruct her to cough and sneeze away from others, and to use a tissue to cough into and wipe her nose. Doing this may prevent her from spreading the cold to the others. Similarly, if your child would be in contact with children who have colds and it is convenient for you to keep her away from them, by all means do so. Also teach her to wash her hands regularly during the day; this will cut down on the spread of viruses.



By the way, the use of a tissue or a handkerchief is preferable to having your child cover her mouth with her hand when sneezing and coughing. If the virus lands on her hand, it can be transmitted to whatever she touches—a sibling, a friend, or a toy.

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