Influenza is a respiratory illness usually caused by infection with one of two influenza viruses – influenza A or influenza B. Outbreaks of influenza (flu) typically occur every winter. Influenza is characterized by an abrupt onset of fever, chills, headache, body aches, and lack of energy accompanied by respiratory symptoms, most frequently cough and sore throat. Most people are largely recovered in one week, although many feel fatigued for several weeks. Serious complications of flu, such as pneumonia, however, can occur, especially if the body’s defenses are weakened by age or disease.

Influenza is spread by inhaling the influenza virus which is usually carried on tiny, invisible water droplets in the air generated by coughs and sneezes. Hand-to-hand contact as well as contact with infected secretions on a hard surface may also cause transmission of the virus.

Each year influenza viruses change and new vaccines are made to combat the particular strains that are expected to cause illness that year. The flu vaccine may reduce the chance of getting the flu by 60-80%, and lessen the severity of illness in the person who does get the flu.

According to the Centers for Disease Control (CDC), everyone 6 months or order should get a yearly flu vaccine. The following people are at high risk for complications of flu and are especially urged to get vaccinated:

- Individuals with chronic heart or lung problems that have required regular medical follow-up or hospitalization during the last year.
- Individuals with other chronic health problems, including diabetes, anemia, asthma, kidney disorders and conditions which suppress the immune system (i.e., receiving chemotherapy, post-splenectomy or HIV+).
- Healthy adults over age 65.
- Medical personnel who come in contact with high risk patients (including medical students working in a hospital setting).
- Pregnant women
- Children under 5 years, but especially those under 2 years old.
- People who are obese.

The amount of antibodies in the body is greatest 1-2 months after vaccination, then gradually declines. For this reason, and because the viruses can change each year, people should be vaccinated each fall.

A common cold, also known as an Upper Respiratory Infection (URI), may occur at any time of year with seasonal peaks occurring in fall and spring and is characterized by irritation and drainage in any of the airways. Any one or more of over 300 viruses are known to cause a common cold.

Symptoms of a common cold may include: scratchy, sore throat, stuffy or runny nose, sneezing, decreased energy, muscle aches, watery eyes or cough (dry or with phlegm).

Colds are primarily spread through contact with an infected individual. It is more likely that the virus will be transmitted if you touch your eyes or nose shortly after hand to hand contact with an infected person. Good hand washing is one of the best protective measures.
Medications used to treat the flu or a cold control symptoms. Antibiotics won’t work—they combat bacterial, not viral, infections. Viruses actually hide inside your own cells where antibiotics cannot affect them. Flu and cold care is aimed at symptom relief and immune system support. These include the following:

- Get plenty of rest
- Do not smoke
- Drink plenty of fluids—up to 3-4 liters per day (to prevent dehydration from fever and to help loosen mucous or phlegm)
- For fever, headache, body aches, or sore throat pain, take Tylenol (acetaminophen) Advil (ibuprofen), or Aleve (naproxen) every 4-6 hours
- For sore throat, gargle every 4 hours with warm, salty water (mix 1/2 teaspoon salt or baking soda in 8 oz. of warm water). Also, try using throat lozenges containing a numbing medication.
- For hoarseness or laryngitis, talk as little as possible. Straining the voice can prolong or worsen laryngitis.
- For heavy amounts of nasal discharge or a large amount of phlegm associated with cough, consider using a mucolytic, such as Mucinex (available over-the-counter).
- For persistent runny nose or nasal congestion, antihistamines and decongestants may be used. Mild antihistamines such as Chlor-Trimeton are useful for runny nose, sneezing and watery eyes. Use a decongestant such as Sudafed (pseudoephedrine) for nasal/sinus congestion or ear fullness. A combination antihistamine/decongestant such as Actifed or Dimetapp may be taken for multiple symptoms. But remember, antihistamines may make you drowsy (decongestants usually will not)!

Flu and colds may lead to secondary bacterial infections or worsening of chronic conditions such as asthma for which prescription medication would be necessary. You should seek medical attention if you are not improving after 7-10 days or for any of the following symptoms:

- Very sore throat that shows no signs of improving after 3 days, or that is accompanied by fever and without any other usual cold symptoms
- Painful swelling of the lymph nodes or glands in the neck
- Discolored mucus from nasal passages for more than 7-10 days
- Pain or tenderness around the eyes
- Ear pain (as opposed to a “full” feeling)
- Cough with production of a large amount of discolored mucus
- Painful breathing, wheezing or shortness of breath
- Cough that persists more than 2-3 weeks
- Severe headaches or facial pain not relieved with over-the-counter medication
- Fever higher than 100.4 degrees for more than 3-4 days

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