



## COLDS AND FLU AND PREGNANCY

*Information in this leaflet is general in nature and should not take the place of advice from your health care provider. With every pregnancy there is a 3 to 5% risk of having a baby with a birth defect or developmental problem.*

### **What are common colds?** <sup>1</sup>

Common colds are infections of the respiratory tract. Symptoms can include sneezing, coughing, a sore throat and a blocked or runny nose and the feeling of having blocked ears. Fever is generally mild when it does occur. Symptoms usually last for 5-7 days

### **What causes a cold?**

Common colds, flu and most coughs are **caused by viruses** and get better on their own. Antibiotics work only on infections caused by bacteria and **have no effect on viruses**. The immune system can fight and overcome these viruses.

The viruses that cause colds occur all year but there tend to be seasonal peaks in early autumn and spring.<sup>2</sup>

### **Why treat a cold?**

It is important to treat a fever and for women to avoid dehydration. Symptomatic treatment will assist in making you feel better but will not necessarily alter the duration or severity of the illness.

Cold viruses are not harmful to the pregnancy however a sustained high fever may be.

### **Non-Drug Treatment.**

- Rest may help to fight the virus and make you feel better.
- Drink something soothing.
- Avoid exposure to cigarette smoke.
- **Saline** (salt water) sprays or drops or **inhaled steam** (in the shower or using a bowl of hot water) can help clear mucus, relieve sinuses or dry a runny nose.

### **Drugs of Choice for Pregnant Women for symptomatic relief of colds/coughs include**

**Fever:** Paracetamol: The recommended dose is 1g (= 2 x 500mg tablets) up to four times a day (total daily dose of 4g/day). Taking paracetamol at the recommended doses has not been shown to increase the risk for pregnancy loss or birth defects.

**Sore throat:** Throat lozenges containing an antibacterial or both an antibacterial and a local anaesthetic can be used to sooth the throat. Iodine containing medications (eg: throat gargles) are best avoided in pregnancy and lactation.

**Nasal Congestion:** Topical nasal decongestants (nasal sprays or drops) such as oxymetazoline and xylometazoline can be used to help decrease the congestion in your nose. These are considered safe to use in pregnancy<sup>3,6</sup>. These preparations should not be used for more than 5 days at a time due to the risk of rebound congestion, (further congestion as a result of the medication) Antihistamines, such as dexchlorpheniramine or chlorpheniramine are also safe to use in pregnancy<sup>3,6</sup>. They will help to dry up a runny nose but are sedating so may be the preferred option for use at night.

**Cough:** Cough mixtures containing pholcodine, dihydrocodeine, or dextromethorphan can be used as a suppressant for a dry cough. Cough mixtures containing bromhexine and/or guaifenesin can be used to assist relief of a productive ('chesty') cough<sup>6</sup>

### **Ensure you only take the recommended doses and see your doctor if symptoms persist.**

*For more information call MotherSafe: NSW Medications in Pregnancy and Breastfeeding Service on 9382 6539 (Sydney Metropolitan Area) or 1800 647 848 (Non-Metropolitan Area) Monday -Friday 9am-4pm (excluding public holidays)*



**Other agents:**

Pseudoephedrine and phenylephrine are used in many cough/cold combination oral preparations.

*There is no conclusive data that these drugs are harmful and inadvertent exposure should not be regarded as cause for concern. Topical nasal decongestants are preferred.*

Refer to <http://www.otispregnancy.org/pdf/pseudoephedrine.pdf> for further information.

**Complementary Therapies for Treatment of Cold:**

Lots of complementary treatments are popular for the treatment of colds and flu. There is variable evidence to support the use of many of these preparations and little information about their safety for use in pregnancy or breastfeeding.

**Vaccination against Influenza <sup>5</sup>:**

The National Health and Medical Research Council recommend that influenza vaccine be offered in advance to women planning a pregnancy, and to pregnant women who will be in the second or third trimester during the influenza season, including those in the first trimester at the time of vaccination. This recommendation is supported by The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG).

**Breastfeeding when you have a cold or flu.**

- Continue to breastfeed your baby during your cold or flu. This will not harm you or your baby and your baby will receive beneficial maternal antibodies.
- Ensure you rest and drink plenty of fluids (eg: water or juice).
- Use good hygiene practices to minimise the spread of infection to others
- Symptomatic treatment is as for pregnancy
- Avoid the use of aspirin but you may use ibuprofen.
- Oral decongestants in cold and flu tablets eg: pseudoephedrine/phenylephrine have been associated with reducing milk supply so should be used with caution<sup>7</sup>

**References:**

1. National Prescribing Service: Common colds need common sense, not antibiotics. <http://www.nps.org.au/> June 4, 2007. Accessed 22.2.08
2. Dolin,R. Common Viral Respiratory Infections and Severe Acute Respiratory Syndrome (SARS). Harrison's Principles of Internal Medicine (online), Fauci AS, Braunwald, DL, et al., eds.: 17<sup>th</sup> edition. McGraw-Hill 2008. (accessed: 11 April, 2008).
3. Rossi S (ed). Australian Medicines Handbook 2008. Australian Medicines Handbook Limited. Adelaide, 2008
4. <http://www.fightflu.gov.au/asp/index.asp?> Accessed 11 April, 2008
5. Australian Immunisation Handbook - 9th Edition 2008 (NHMRC)  
[http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/5335A7AB925D3E39CA25742100194409/\\$File/handbook-9.pdf](http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/5335A7AB925D3E39CA25742100194409/$File/handbook-9.pdf) Accessed on line 11 April 2008.
6. Australian Drug Evaluation Committee. Prescribing Medicines in Pregnancy. An Australian Categorisation of risk of drug use in pregnancy. 4<sup>th</sup> edition. Commonwealth of Australia, 1999
7. Hale. TW. Medications and Mothers' Milk. 12<sup>th</sup> ed. Hale Publishing. Amarillo, 2006

**Additional Information:**

- <http://www.nps.org.au/consumers/campaigns/ccncs>
- <http://otispregnancy.org/pdf/pseudoephedrine.pdf>
- <http://otispregnancy.org/pdf/influenza.pdf>
- <http://www.fightflu.gov.au/asp/index.asp?>

August 2008