

When your child has frequent colds

Some children seem to have the sniffles constantly. They get one cold after another, leading many a parent to wonder, "Is my child having too many colds?" Children start to get typical colds after about 6 months of age. During infancy and the preschool years they average seven or eight colds each year. School-age children average five or six colds per year. Adolescents finally reach an adult level of approximately four colds per year.

Colds account for more than 50% of all acute illnesses with fever. If your child is over 3 years of age, sneezes a lot, has a clear nasal discharge that lasts longer than one month, but doesn't have a fever and has symptoms mainly during pollen season, they probably have a nasal allergy rather than a cold.

In addition to colds, children can get diarrheal illnesses (with or without vomiting) two or three times per year. Some children are especially worrisome to their parents because they tend to get high fevers with most of their colds, or they have sensitive gastrointestinal tracts and develop diarrhea with colds.

The main reason children get all these infections is that they are being exposed to new viruses. There are at least 200 cold viruses. The younger the child, the fewer viruses he has been exposed to and the less antibody protection he has acquired as a result. Children who attend day care, a play group, a church nursery, or a preschool are directly exposed to more infections than children who don't. Children with older siblings in school have more indirect exposures. The older siblings catch colds and bring them home. Colds are thus more common in large families.

The rate of colds triples in the winter when people spend more time crowded together indoors breathing recirculated air. Smoking in the home increases a child's susceptibility to colds and coughs as well as ear infections, sinus infections, croup, wheezing, and asthma.

WHAT DOESN'T CAUSE FREQUENT COLDS

Most parents worry that a child who is ill repeatedly has some serious underlying disease. Children with immune system disease (inadequate antibody or white blood cell production) don't get any more colds than the average child. Instead, they often have more serious, life-threatening infections and recover more slowly. Moreover, children with serious disease usually do not gain weight adequately.

Some parents worry that they have in some way neglected their child or done something wrong to cause frequent colds. On the contrary, having a lot of colds is an unavoidable part of growing up. Colds are the one infection we can't prevent. From a medical standpoint, colds are an educational experience for your child's immune system.

Look at your child's general health. If your child is vigorous and gaining weight, you don't have to worry as much about their health. To put the problem in perspective, consider the findings of a recent survey: On any given day 10% of children have colds, 8% have fevers, 5% have diarrhea, and 3% have ear infections.

Children get over colds by themselves. Although you can reduce the symptoms, you can't shorten the course of the cold. Your child will muddle through like every other child. Remember that the long-term outlook is good. The number of colds will decrease over the years as your child's body builds up a good supply of antibodies to the various viruses.

Send your child back to school as soon as reasonable. Your child can return to school or preschool when the fever is gone, the child feels better, and cough symptoms are not excessively noisy or distracting to classmates. Gym and team sports may need to be postponed for a few days until your child feels well enough to participate. It doesn't make sense to keep a child home until she is no longer shedding any virus at all because this could take two or three weeks. Besides, the "germ warfare" that normally occurs in schools is fairly uncontrollable. Children shed germs during the first days of their illness, before they even look sick or have symptoms, as well as after symptoms develop. In other words, contact with respiratory infections is unavoidable in group settings such as schools or day care. As long as your child's fever has cleared, there is no reason she cannot attend parties, play with friends after school, and go on scheduled trips.

In general, your child can go back to day care once the fever is gone. There is no reason to prolong the recovery at home if you need to return to work. Nor do you have to take your child out of preschool or day care permanently because of repeated minor illnesses. Do be considerate to others and teach your child to wash their hands and cover their coughs.

WHAT DOESN'T HELP

There are no instant cures for recurrent colds and other viral illnesses. Antibiotics don't help unless your child develops complications caused by a bacterial infection, such as an ear infection, sinus infection, or pneumonia. Having your child's tonsils removed doesn't help because colds are not caused by infected tonsils. Nor are they caused by poor diet, lack of vitamins, bad weather, air conditioners, or wet feet. Remember, the best time to have these inevitable infections and develop immunity is during childhood.

WHAT HELPS

Tolerate your child having some cough and cold symptoms. What does help is giving ibuprofen or Tylenol for fever and any aches and pains. Run a humidifier if the air is dry in your house. Younger children can be treated by using saline nose sprays or drops followed by suctioning out the excess mucous. If your older child is bothered by the cough and cold, it's okay to occasionally give some over-the-counter type of cold medicines for children over 6 years old, and on our recommendation if younger than 6 years old. Use whichever brand works best on your child in the past, such as Dimetapp, Benadryl, and many others.

Good luck!