

# Saline nasal wash helps improve children's cold symptoms

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A saline nasal wash solution made from processed seawater appears to improve nasal symptoms and may help prevent the recurrence of respiratory infections when used by children with the common cold, according to a report in the January issue of Archives of Otolaryngology, one of the JAMA/Archives journals.

Infections of the upper respiratory tract and sinus infections are common among children, according to background information in the article.

“Nasal irrigation with isotonic [balanced] saline solutions seems effective in such health conditions and is often used in a variety of indications as an adjunctive treatment,” the authors write as background information in the article. “Although saline nasal wash is currently mentioned in several guidelines, scientific evidence of its efficacy is rather poor.”

Ivo Šlapak, M.D., of Teaching Hospital Brno, Brno, Czech Republic, and colleagues randomly assigned 401 children age 6 to 10 with cold or flu to two treatment groups, one receiving standard medication and the other also receiving a nasal wash with a modified processed seawater solution. “Patients were observed for a total of 12 weeks, from January to April 2006, during which health status, symptoms and medication use were assessed at four visits over the course of the trial,” the authors write. “Acute illness was evaluated during the first two visits (up to three weeks), prevention during the following two visits (up to 12 weeks). The third visit, scheduled for week eight after study entry, could be conducted over the telephone.”

For children in the nasal wash group, the formula was administered six times per day during the first phase and three times per day during the prevention phase, in one of three strengths: medium jet flow (9 milliliters per nostril), fine spray (3 milliliters per nostril) and a dual eye/nose formula with fine spray (3 milliliters per nostril).

A total of 390 children completed the study. By the second visit, the noses of patients using saline were less stuffy and runny. During the prevention phase, eight weeks after the study began, those in the saline group had significantly less severe sore throats, coughs, nasal obstructions and secretions than those in the standard treatment group.

In addition, during the prevention phase, fewer children in the saline group were using fever-reducing drugs (9 percent vs. 33 percent), nasal decongestants (5 percent vs. 47 percent), mucus-dissolving medications (10 percent vs. 37 percent) or antibiotics (6 percent vs. 21 percent). During the same period, children using saline had fewer days of illness, missed school days or complications.

The nasal wash was well tolerated, although participants reported less discomfort using the fine spray formulations. “We did not hear substantial complaints about compliance, and good compliance seemed to be confirmed by the weight of returned empty bottles,” the authors write.

Source: JAMA and Archives Journals

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