

So you have the flu? Follow this self-care guide for recovery

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(PhysOrg.com) -- It's flu season, and whether you have the H1N1 virus or just the garden variety flu virus, you may not feel like doing much of anything — especially going out to meet friends or heading off to work. That's a good thing, according to health care professionals. Anyone with flu-like symptoms should do all they can to avoid contact with others, at least until 24 hours after their fever has cleared without the use of fever-reducing medications.

With the number of flu cases expected to rise in the coming month as [flu season](#) hits its stride, doctors in University Health Services have prepared the following Self-Care Guide for Influenza for students, faculty and staff to consult in the event they contract the [flu](#).

Self-Care Guide for Influenza

Following these basic guidelines can help ease your discomfort and speed your recovery. If you have questions or concerns about any of these suggestions, please be sure to contact your physician.

— Increase your fluid intake. Drinking more fluids will help you stay hydrated and better control your temperature. Fluids such as water, sports drinks and clear broth soups are generally well tolerated.

— Get plenty of rest. Stay in bed and rest as much as possible.

— Wash your hands frequently. Use alcohol-based hand sanitizers after coughing, sneezing and wiping your nose to reduce the spread of the virus.

— Isolate yourself in your room or home until at least 24 hours after fever has cleared without the use of fever-reducing medications. This means that your temperature should be below 100 degrees for at least this time period.

— For fever, chills and body aches use an NSAID (non-steroidal anti-inflammatory medication), like ibuprofen (generic Motrin or Advil) or naproxen (generic Aleve). The major side effect of NSAIDs is irritation of the stomach, occasionally leading to gastrointestinal ulceration and bleeding. Stop the medication if you have stomach upset or pain. Consider taking acetaminophen (Tylenol) instead, for fever and pain if you have stomach upset.

DO NOT TAKE ASPIRIN.

— For stuffy nose and congestion use a decongestant. The only effective oral decongestant currently available is pseudoephedrine. You must ask the pharmacist for this medication, although no prescription is required. Decongestants purchased off the shelf contain phenylephrine and are much less effective. Oral decongestants may produce rapid heart rate, blood pressure elevation, nervous stimulation and restlessness, which may interfere with sleep. An alternative to the oral medication is a decongestant nose spray oxymetazoline hydrochloride (generic Afrin). This can rapidly relieve nasal obstruction. When the decongestant effect of the drug wears off, nasal obstruction rapidly returns. Therefore, this can be very effective, but limit use to 3 days (if used twice daily) or 5-6 nights (if only used at bedtime). Overuse by just a few days can result in “rebound” obstruction and mucosal damage.

— For runny nose, sneezing and cough try an antihistamine. The most effective antihistamines are first-generation, although they tend to cause drowsiness. Examples of first-generation antihistamines are brompheniramine (generic for DimeTapp), *chlorpheniramine (generic for Chlor-Trimeton and Singlet), *diphenhydramine (generic for Benadryl), and *doxylamine (generic for NyQuil and Alka-Seltzer Plus Night-Time Cold Medicine). The newer (non-sedating) antihistamines do not appear to have the same degree of effectiveness for treating colds. Examples are *Loratadine (Claritin), Fexofenadine (Allegra - prescription required), and *Certirizine (Zyrtec).

— For cough you can try a cough suppressant. Cough suppressants are natural narcotics, like codeine, and synthetic narcotics, like dextromethorphan (DM). They act on the brain to depress the cough reflex center. Their effectiveness in patients with chronic cough has been demonstrated in controlled studies but there is little published information on their effectiveness in coughs associated with colds. Cough suppressants can produce gastrointestinal discomfort but otherwise have few side effects. In normal healthy people with good cough reflexes, cough suppressants are safe.

Drug interactions may occur with DM and certain anti-depressants. If you are on an antidepressant, discuss this with your health care provider.

— For sore throat or nasal congestion consider using a saline rinse. Various nasal saline rinse kits are available commercially or you can make your own saline by mixing ½ teaspoon of salt and 8 ounces of warm water in a clean container. For the nose: Place the above mixture in a reusable sinus rinse bottle or draw up into a nasal bulb syringe. The most convenient way to perform a sinus rinse is in the shower or over a sink. For the throat: Swish and spit. Keeping a throat lozenge, [cough](#)

drop, or hard candy in your mouth will stimulate your saliva and help soothe your throat.

*Available over-the-counter at the UHS Pharmacy

Provided by Pennsylvania State University ([news](#) : [web](#))

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