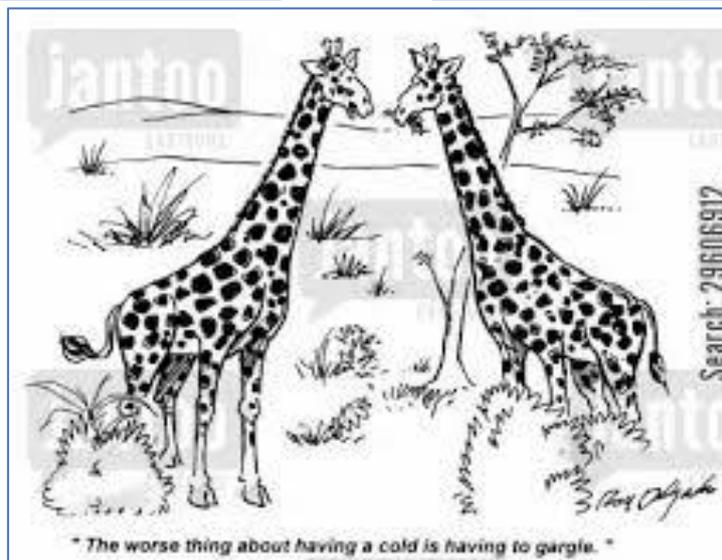




Winter

PHARMACY ASSISTANT INFORMATION

Colds | Coughs | Sore Throats



Colds

What is a cold?

Colds are viral infections that occur all year round but are more prevalent in winter. Viruses are spread through the air when you cough or sneeze and are spread via touch. Patients may be aware that other people close to them e.g. family, work mates, friends will also have the same symptoms, "It's been going around". These viruses commonly affect our nose, throat and chest.

Viral infections rarely require a trip to the doctor but sometimes you can get a bacterial infection as well, that may need antibiotics e.g. middle ear infection, sinus infection, bronchitis, tonsillitis, pneumonia. Generally, the patient would have yellow/green mucous that developed 4 days after initial symptoms. A high fever will also be present in these patients. These patients must be referred to a doctor.

Symptoms

The symptoms of a cold include:

- sore throat
- runny/blocked nose (mucous normally cloudy or sometimes yellow/green)
- headache
- sneezing
- cough (dry or productive)

A true influenza virus (the flu) includes all these symptoms plus high temperatures and aches and pain.

NB: Allergies also produce a runny nose, which is usually clear, watery and in abundance and is associated with itchy eyes, sneezing and usually occurs at the same time every year.

Cold symptoms tend to last for 7-10 days regardless of whether you treat them or not.

People come to the pharmacy for symptomatic relief of their cough and cold symptoms.

Lifestyle choices that help

Things that people can do while they have a cold/flu to help with the symptoms include:

- Plenty of rest and staying warm
- Drinking 6-8 glasses of fluid each day to keep the mucous more liquid
- Breathing in steam (Vaporizer in room or a steamy bathroom)
- Eating a balanced healthy diet
- Getting plenty of sleep
- Blowing the nose with one or both nostrils open so they do not force infection up into the middle ear
- Covering a cough or sneeze with a tissue. Washing hands regularly, especially before cooking or eating
- Cutting down on smoking – it makes symptoms worse
- Keeping warm, but not overheating.

Zinc, Vitamins A, C & E and the BioCeuticals ArmaForce range can be used to help boost the immune system, thereby reducing the severity and duration of colds and flu symptoms. These types of products may be recommended at the start of a cold.

Treatment options

There is no cure for a cold except time and patience, however there is symptomatic relief available from your pharmacy. Treatment aims to manage the symptoms while the body heals.

Before any medication is recommended, we **MUST** ask a few questions to ensure the right product and advice is given to the patient. There are multiple medications and disease states that can interact with cold medications, such as blood pressure, diabetes, heart disease, anti-depressant medication, thyroid disease, pregnancy and breast-feeding. These questions allow you to refer to the pharmacist when appropriate.

1. Who is the medicine for?...if infant(<2 yrs), child, elderly (>65 yrs)...refer to pharmacist
2. Are you taking any other medication?...if yes...refer to pharmacist
3. Do you have any other health conditions?...if yes...refer to pharmacist
4. Are you pregnant or breastfeeding?...if yes...refer to pharmacist
5. What are the symptoms and how long have you had them?
6. Have you tried any medication already?
7. Was it effective? ...if.no...refer to pharmacist

Each symptom of a cold needs to be treated individually. By listening to what the patient tells you about the symptoms, indicates which symptoms they are most concerned about, and which symptom they would like relief from.

Runny or blocked nose

Nasal congestion would nearly be the number one symptom that people complain about with a cold. It can be either stuffy and congested or runny. Nasal congestion occurs when the body produces excess nasal mucous, to try and deal with the viral infection. However, some medications may also cause nasal stuffiness. Stuffy noses can make it hard for people to sleep at night and for infants to feed.

Additional Questions to ask:

8. What is the nature of the discharge? Yellow or green... if yes refer to pharmacist
9. When did it start?
10. Are there any other symptoms?
11. Has anything been given or used yet for the runny nose?

Treatments for nasal congestion include: nasal decongestants in either tablets or sprays, inhalations, saline sprays to thin the mucous, or antihistamines.

Use this table to train team members by having them identify product examples.

Mechanism of Action	Medicine	Product example
Nasal decongestants in tablet form	Pseudoephedrine Pharmacist Only / Schedule 3	
	Phenylephrine Pharmacy Medicine / Schedule 2	
Decongestant nasal drops or sprays	Oxymetazoline	
	Xylometazoline	
	Tramazoline	
Mucous thinners	Saline / sodium chloride	
Inhalations	Menthol	
	Eucalyptus	

Other information:

Pseudoephedrine and phenylephrine are the most common source of concern.

- They interact with anti-depressants, high blood pressure medication - elevating blood pressure, and can affect patients with heart disease.
- Pseudoephedrine is category B2 and not recommended in pregnancy.
- They should be used only with caution in breastfeeding, especially with younger infants. They can disturb baby's sleep patterns and make the infant restless. They may also decrease the mother's milk supply.
- Pseudoephedrine and phenylephrine need to be avoided by patients with diabetes, as they can reduce the effectiveness of their diabetic medication.

Pseudoephedrine products are Pharmacist Only (Schedule 3) and are considered more effective in reducing nasal discharge than phenylephrine, which is Pharmacy Medicine (Schedule 2).

Nasal sprays and antihistamines are potential alternatives for people with high blood pressure and with diabetes who cannot use Cold & Flu tablets.

Nasal sprays should only be used for 3 to 5 days in a row. A couple of day's break should then be taken before reusing if necessary. This is because continual use of nasal spray decongestants can dry the nose out too much, causing something known as 'rebound congestion'. This is where the body starts to produce more mucous to moisten the nose again.

Fess and Narium nasal sprays, which contain saline, can be used as often as needed.

You need to use saline nasal drops in infants, not sprays.

Headache

Headaches are a common symptom of not feeling well. They may occur in colds due to sinus/nasal congestion increasing the pressure in the head, therefore they are associated with a head cold, and need to be treated in conjunction with sinus congestion.

Treatments include simple analgesics such as paracetamol, ibuprofen or a combination product.

Other Information:

Only use paracetamol at the recommended dose. **NO MORE** than 8 paracetamol containing tablets in a 24 hour period.

Aspirin must not be used in children under 18 for fever or muscle aches and pains.

Rest will also help treat the headache, as will water, if they are dehydrated.

Need to be cautious of other medication and other disease states when using an ibuprofen

- some people are sensitive to ibuprofen and aspirin resulting in an asthma attack
- Ibuprofen needs to be avoided by people on high blood pressure medication

- Aspirin and ibuprofen can 'thin the blood', therefore needs to be avoided by some people on other medications.

Paracetamol is an analgesic that pregnant people can use.

Cough

A cough, which develops as part of a cold, often occurs within the first few days of the onset of symptoms. The cough may be dry or productive. In addition to a cold a cough may be a symptom of other disease states or drug induced. For example, a cough may be associated with asthma.

Additional Questions to ask:

1. How long have you had the cough? If more than a week....refer to pharmacist
2. When is the cough the worst?... If it is a dry cough at night in child....refer to pharmacist
3. Can you tell me what the cough is like?
4. Are you coughing up anything?
5. What is the colour of the phlegm?... If yellow or greenish....refer to pharmacist

A productive cough or chesty cough involves phlegm and mucous. The phlegm is clear or whitish in colour, with a fairly thin consistency. Phlegm on the chest, which is yellow or greenish in colour, is often a sign of a bacterial infection and **MUST** be referred.

Never use a suppressant for a chesty cough, because the phlegm needs to be expelled from the lungs rather than stay inside, as this can develop into a serious infection.

We treat a chesty cough with mucolytics and/or expectorants. A mucolytic thins the mucous and expectorants break up the mucous making it easier to be coughed up.

Use this table to train team members by having them identify product examples.

Mechanism of Action	Medicine	Product examples
Expectorants	Guaphenesin	
	Senega and Ammonia	
Mucolytics	Bromhexine	
Expectorant + Mucolytics	Guaphenesin + Bromhexine	
Cough suppressants	Dextromethorphan	
	Pholcodine	
	Codeine	
	Dihydrocodeine	

Other Information:

Coughs that occur mainly at night may be due to asthma or a post-nasal drip. A dry cough associated with a wheeze MUST be referred. A post-nasal drip may also cause the patient to have bad breath and a nasty taste in the mouth, especially in the morning. Post-nasal drip should be treated with a nasal decongestant.

Diabetic patients need to use sugar free syrups.

Some medications can cause a cough – refer patients on other medication.

Dextromethorphan can interact with some antidepressants and needs to be avoided.

Cough syrups may be used in pregnancy.

Sneezing

Sneezing can sometimes be associated with a cold. You do need to be careful to determine that it is due to a cold, and not an allergy by other symptoms present. The treatment however will be the same.

Treatment involves the use of antihistamines. Antihistamines used in cold and flu medications cause drowsiness, allowing people to get some sleep. They also have a drying effect of their own and can be used for nasal congestion.

Sore Throat

Patients with a mild viral infection may have a sore throat, which can be described as hoarse, scratchy, inflamed, uncomfortable or irritating. In severe viral infections such as influenza, the sore throat is not the most severe symptom. In general, a sore throat is a sign that your body is fighting an infection, and so can be associated with other conditions such as: tonsillitis, cold sores, chicken pox, glandular fever. If the person presents with any unusual symptoms, refer to the pharmacist.

Additional Questions to ask:

1. How long have you had the sore throat?...If more than 7 days...refer to pharmacist
2. Can you describe what you mean by sore?
3. Do you have any other symptoms? Consider referring if necessary
4. Have you had any similar episodes recently?...If yes....refer to pharmacist
5. Does anyone at home or work have the same symptoms?

Treatments for a sore throat include: gargles, sprays and lozenges. These are designed to reduce inflammation and pain, and have some antibacterial properties.

Use this table to train team members by having them identify product examples.

Mechanism of Action	Medicine	Product examples
Anti-inflammatory	Benzydamine	
Anti-viral +/-or Anti-bacterial	Povidone iodine	
	Cetylpyridinium	
	Dichlorobenzyl	
	Amylmetacresol	
Anaesthetic	Benzocaine	
	Lignocaine	
Others	Saline	

Other information:

People with diabetes should use sugar free lozenges.

Products containing anaesthetics – warn patients to watch the temperatures of hot foods and drinks as their whole mouth will be a little numb, and they may not be able to tell the temperature accurately, so they could burn their mouth.

Gargles need to be used for about 30 seconds before they are spat out.

Children under 6 should not use lozenges or gargles without counselling by the pharmacist.

Useful tips to remember

When considering what the right product is for your patient, you need to take into account the WHOLE person, such as all the symptoms PLUS the patients age, other disease states and medications, as well their lifestyle.

For example, if the patient has to work, you don't want to give them something that will make them drowsy.

As we all know most people come in to the pharmacy with more than one symptom, which they want treated. You can use a combination of the above products to give maximum relief for your patient.

For example: you may recommend combining a cold & flu tablet containing a nasal decongestant and paracetamol with a cough syrup, which will help remove mucous.

Always look at what is in the products, and never give TWO products with the same ingredients.

When you get a product request, always ask WHO it is for. You may come across the situation where someone comes in for a Cold & Flu medication, but they may have 4 people in the family all with different symptoms. Each one may need individualised treatment to suit their particular circumstances.

Always point out to the customer the correct dose and how often they can use the medication. This information can be found on the side of the box.

Case study 1

Fred, the butcher next door to the pharmacy, phones you and says he is sending his young apprentice, Jason, aged 17 home with a sore throat. He is sending him to the pharmacy before he goes home to get something to help ease the inflammation.

Questions to ask:

How long have you had a sore throat? Began last night

Can you describe what you mean by sore? It feels hot and hurts to swallow, but I did manage to eat a normal breakfast. Not dry or scratchy.

Do you have any other symptoms? Not really, but I'm not feeling 100%.

Have you had a sore throat recently? No.

Does anyone else at home or at work have a sore throat? No.

What have you tried in the past? I can't remember, I used whatever my Mum gave me.

Treatment recommended:

Lozenge with a local anesthetic, anti-inflammatory and antibacterial properties.

May wish to gargle salt water when he gets home.

Other information:

Counsel on use of lozenges – how often to use the lozenges (maximum quantity per day if there is a limit), temperature on hot foods and drinks.

Keep up the fluids, cold drinks will feel good on the throat.

If it gets worse or lasts for more than a week, see your doctor.

Sometimes a cold starts with a sore throat and then the nasal symptoms emerge a few days later. Come back and see us if that happens as we can give you something to relieve a runny or blocked nose.

Case study 2

Mrs Henderson requests a product for her six-month-old son Pete's runny nose.

Questions to ask:

Is the discharge from both nostrils? Yes.

What is the nature of the nasal discharge? Clear in colour, not watery or profuse.

When did it start? It started 2 or 3 days ago.

Are there any other symptoms? Coughs when lying down, and is not coughing anything up. No fever, and is eating normally.

Is he taking any medications? No, but I gave him some Panadol thinking it could help.

Treatment Recommended:

Saline nasal drops.

Taking Pete into a bathroom after a hot shower, so he can breathe in the steam.

Other information:

* Counsel on use of saline nasal drops – clear Pete's nose before using the drops as much as possible. Tell Mrs Henderson to lie Pete face upwards across her knees so that his head is lower than his shoulders. Insert the dropper about 0.5cm and squeeze 2-3 drops out into both nostrils. Try to keep Pete in that position for a few minutes to let the drops penetrate.

* Explain to Mrs Henderson that the excess mucous, which appears to be dripping down the back of his throat when Pete sleeps, seems to be the cause of his cough.

* Peter's cough may be helped with raising the height of the head end of his bed, so he is no longer lying flat. Can be done by putting a towel, for example, under that end of his mattress.

* If no fever is present, the Panadol should be stopped. It won't help with the nose.

* Make sure plenty of fluids are given to Pete.

* If the condition does not improve within 5 days, or if Pete develops a high temperature, coloured mucous or congestion in his chest – see your doctor.

* The dropper should only be used on Pete and rinsed after each use.

Case study 3

Mr Dean, an accountant, comes to the pharmacy for something to relieve his cough.

Questions to ask:

How long have you had the cough? I have just had the flu, and while the head cold seems to have gone, this irritating cough is hanging around.

When is the cough most of a problem? It occurs throughout the day, but once I start, sometimes it is really hard to stop.

Are you coughing anything up? No

Are there any other symptoms? No, they have cleared up.

Have you used anything to help the cough yet? I have tried sipping some honey, while it soothes it doesn't get rid of the cough.

Are you taking any other medications? No

Treatment recommendations:

A cough suppressant syrup for dry coughs.

Other Information:

* Let Mr Dean know that the syrup should only be used if there is no phlegm present.

* He needs to contact his doctor if his cough causes pain for if he experiences any difficulty breathing.

NOTE: Role plays are an excellent way for team members to become confident and proficient in providing customer service to a level that ensures best patient outcomes.

Marketing ideas

- Enable all pharmacy assistants access this information pack and discuss at a staff meeting.
- Obtain posters and other display material from supplier representatives - create a display
- Make sure the cold and flu section is well stocked, ticketed and laid out
- Many pharmacies have Colds and Flu next to Sinus Allergy so consider reducing the Allergy space for winter and increasing the Cold and Flu shelf space as the season changes.
- Ensure the Health Information Brochures for Coughs, Cold and flu, Cold sores are well stocked and correctly positioned on shelf

