

Title: "Is Honey Better for Your Child's Cough Due to the Common Cold than Dextromethorphan (e.g. - Robitussin)?"

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Abstract: Honey is generally believed to be safe outside of the infant population (it may cause botulism, a potentially fatal disease, in infants under one). Honey is also known to have antibacterial properties and is cited by the World Health Organization as a potential treatment for upper respiratory infections. In a recent study comparing honey, dextromethorphan, and no treatment, parents of children with colds rated honey the highest for relief of their child's cough and sleep problems. As a result, the authors concluded, honey is likely a better treatment for the cough and sleep difficulty associated with childhood upper respiratory tract infections. Suggested dosing is: 2-5 years - 1/2 teaspoon, children 6-11 years - 1 teaspoon, and children 12-18 years - 2 teaspoons every 6-8 hours as needed.⁴ Use caution when administering honey to a child with a personal or family history of allergies as allergic reactions are known to occur with honey.

This document was created by a medical student enrolled in the Primary Care Clerkship at the University of Minnesota Medical School as part of the course project. The aim of the project is to present information on a medical topic in the format of a patient education handout. It does not necessarily reflect the views of the University of Minnesota Medical School physicians and faculty. These materials are provided for informational purposes only and are in no way intended to take the place of the advice and recommendations of your personal health care provider. The information provided may no longer be up to date since it has not been reviewed since the date of creation. The information provided should not be used to diagnose a health problem or disease, or as a means of determining treatment. In the event of a medical emergency, immediately contact a doctor or call 911.

Is Honey Better for Your Child's Cough Due to the Common Cold than Dextromethorphan (e.g. - Robitussin)?



According to the American College of Chest Physicians, the most common cause of acute cough is believed to be the common cold.¹

Does Your Child Have a Cold?

Symptoms²

- Cough
- Clear, watery runny nose or nasal discharge
- Trouble breathing through the nose or nasal obstruction
- Fever above 100.4°F/38°C
- Sneezing
- Facial pain
- Ear fullness

Causes of the Common Cold^{2,3}

- Rhinoviruses (30–50%)
- Coronaviruses (10–15%)
- Influenza (5–15%)
- Respiratory Syncytial Virus (5%)
- Parainfluenza (5%)
- Adenoviruses (<5%)
- Enteroviruses (<5%)
- Unknown (20-30%)

What Usually Happens?

- Unless there is an overlying bacterial infection, or super-infection, the condition is self-limiting and usually goes away without treatment within 7 to 10 days.²

Are There Any Treatments?

The common cold is caused by numerous different viruses. There are no curative treatments – antibiotics do not kill viruses. The hundreds of over-the-counter treatments that are available for the common cold help relieve the symptoms (e.g. – cough, runny nose, etc.). And, although antibiotics are not effective against viruses, they are widely used in the treatment of uncomplicated viral upper respiratory infections.³

What About Cold Medicine?

Numerous studies have found that over-the-counter cough and cold medicines are not any more effective than no medicine at all in relieving a cough.⁵ Many of these medicines contain a chemical called dextromethorphan (e.g. – Robitussin® DM, Coricidin® DM, Alka-Seltzer Plus® Night-Time). Despite these brands' claim to suppress cough, scientific studies have shown very little, if any, reduced cough with these medications. Although generally considered safe, each year, about three children die from unintentional overdose of cold and cough medicines. In 2005, accidental misdosings led to more than 100,000 calls to U.S. Poison Centers. Additionally, the FDA advised in 2007 that these medications not be given to children <2 years old because they have not been proven safe or effective in this age group.⁷

Is Honey Really Safer and Better?

Honey is generally believed to be safe outside of the infant population (it may cause botulism, a potentially fatal disease, in infants under one). Honey is also known to have antibacterial properties and is cited by the World Health Organization as a potential treatment for upper respiratory infections. In a recent study comparing honey, dextromethorphan, and no treatment, parents of children with colds rated honey the highest for relief of their child's cough and sleep problems. As a result, the authors concluded, honey is likely a better treatment for the cough and sleep difficulty associated with childhood upper respiratory tract infections. Suggested dosing is: 2-5 years - 1/2 teaspoon, children 6-11 years - 1 teaspoon, and children 12-18 years - 2 teaspoons every 6-8 hours as needed.⁴ Use caution when administering honey to a child with a personal or family history of allergies as allergic reactions are known to occur with honey.

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