Up Your Nose!

It’s getting to be cold season, so let’s talk about nasal sprays for colds.

**Saline (salt water)** spray is good for allergies, good for a cold, and good for bacterial sinusitis. There are many different brands out there, but my favorite is Ocean, as it smells better than other brands, and doesn’t burn my nose. You can get it in little squeeze bottles, but sometimes they go bad, likely from bacteria from your nose. Even though it’s more expensive, I like the Ocean Complete Sinus Irrigation, which is in a pressurized bottle; it never goes bad. NeilMed has a competitor but I like the Ocean better. And it squirts up your nose pretty strongly, so it’s great at getting out those deeply-buried boogers.

Yes, you can get a neti pot, but make sure that you use only sterile water, not tap water. Two people in Louisiana died from amebic brain abscesses from using tap water in a neti pot.

**Ipratropium (ATROVENT)** nasal spray has been available for a long time, by prescription only. It helps colds and allergies, but only a tiny bit, and it’s expensive. I tried it once and noticed no difference at all and gave up on it. I don’t recommend it to patients, either.

**Steroid nasal sprays** (discussed last month) are good for allergies, and good for bacterial sinus infections (some studies show it to be as good as an antibacterial antibiotic, but both are probably best), but don’t help colds. Even if you don’t have allergies, when you have a bacterial sinusitis, a steroid spray will work. Standard dosage for allergies is once a day. For people with bacterial sinusitis, I recommend twice a day until better.

**AFRIN (oxymetazoline)** is a decongestant that works very quickly. You can get Neosynephrine that does the same thing but Afrin lasts twice as long (12 hours) so I have no idea why anyone would buy Neosynephrine spray.

It’s easy to get addicted to Afrin (ask a certain Mercy ED attending), especially if you have allergies. You’re using everything we discussed last month for allergies, and you’re still miserable; you use some Afrin and suddenly you can breathe through your nose for the first time in your month! But if you keep using it, and you stop, you get rebound swelling in your nose that’s worse than what you had at the beginning. It’s called *rhinitis medicamentosa*.

The Afrin bottle says to not use for more than three days. Some research suggests 10 days. I split the difference and recommend just seven days. And as you taper off, use it just at night; when you lay flat, your nasal mucosa swells, and this is when you need it most.

Some recent research suggests that Afrin not only opens up your nose, it also reduces inflammation as well; maybe it makes you get over a cold faster.

References available at: