Remember, a cold is a viral infection that cannot be cured with antibiotics. Common remedies (drinking fluids, having soup, sucking on hard candy, washing hands often, salt-water gargling etc) can help with colds, sniffles, sore throats, coughs, and aches and pains:

Myth 3: It is okay to stop taking an antibiotic after your symptoms go away.

Absolutely not. You need to finish the entire prescription, even if you feel well or no longer experience symptoms. It is important to take an antibiotic exactly as the doctor prescribes. Not finishing the full dosage as prescribed leaves some bacteria alive and "resistant" to future antibiotic treatment.

By not completing the prescription or skipping doses, it is probable that the strongest of the bacteria still remain. These bacteria will continue to replicate and you will have to address the infection for a second time, this time facing a stronger opponent.

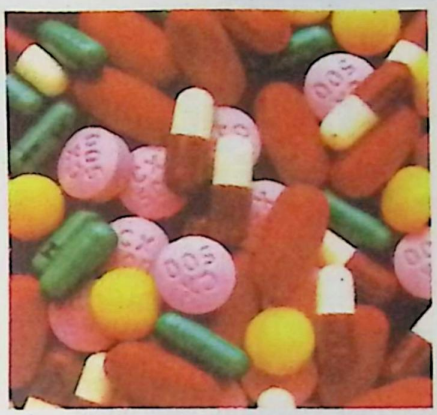
It is equally dangerous to resume using a prescription from a previous infection. In this case, there is a strong possibility for mis-diagnosis and you could be exposed to unnecessary antibiotics and the possible adverse effects, which may include: nausea, diarrhoea, and increased sensitivity to sunlight. Most side effects are mild, but some, especially allergic reactions, can be severe. An allergic reaction can even be life threatening.

Myth 4: Children fight off most childhood illnesses better with antibiotics.

Yes, taking antibiotics when unnecessary can harm your child. The most common childhood illnesses (sore throats, bronchitis and colds) rarely warrant antibiotics. Children may get better a bit quicker at first with antibiotics, but then they are likely to get sick more often, with longer, more stubborn infections caused by more resistant bacteria. The routine use of antibiotics makes life worse for children and parentseven apart from the side effects and risks of allergic reactions many children have. According to Dr. Greene's House Calls (an online health information resource offering parents pediatric advice) up to 60% of children with common colds are treated with antibiotics. Because children average three to eight colds each year, they can get many, many rounds of unnecessary (and therefore harmful) antibiotics.

Ear infections in children are tricky because not all ear infections are the same. Ear infections are usually classified as either acute otitis media (AOM) or otitis media with effusion (OME). It is important for your doctor to diagnosis what kind of ear infection your child has so you know how to treat it. Most children with ear infections have OME, fluid in the ear without signs of an acute middle ear infection. Half of young children with colds get OME. Antibiotics are not useful for the initial treatment of OME, although they may be worth a try if OME last for longer than 3 months. Antibiotics are appropriate for AOM with documented fluid in the ear and clear signs of acute illness.





One of the many antibiotic resistant bacteria.

It is also important to ask questions if your doctor prescribes an antibiotic. The CDC recommends you ask your doctor the following questions:

- Why does my child need an antibiotic?
- What is the name of the drug?
- How and when does he/she take it and for how long?
- Are there food, drinks or activities my child should avoid while taking this medication?
- Does the medication cause side effects? What are they and how can I prevent them?
- Can he/she take this medication safely while also taking another prescription or nonprescription medicine?

Now that you went through each myth, resist the urge!

As part of our continual commitment to helping you maintain a healthier lifestyle, First Health wants you to use antibiotics appropriately. Smart use of antibiotics is the key to decreasing, or even reversing, the spread of resistance. Taking antibiotics properly can help prevent having to take more dangerous and more costly medications. Take your medicine exactly as it is prescribed and do not expect to take antibiotics every time you get sick. You can better manage your health if you have the right information and communicate with your doctor.

What happens when you miss a dose of antibiotic?

Antibiotics work best when there is a steady blood level. When you miss an antibiotic dose, drug levels of the medicine in your blood decrease and all the harmful germs will not be killed. An incomplete course of antibiotics often wipes out only the most vulnerable bacteria, which allows relatively resistant bacteria to survive and thrive. In that case, either the symptoms will not go away at all, or the symptoms will comeback in a short period of time. When an improperly treated infection needs to be retreated, often the resistant germs will require a "stronger" or at least a "different" antibiotic. This is why it is so important to take the drug at evenly spaced intervals, to avoid missing doses and to complete a full course of therapy.

sources: www.firsthealth.com, pediatric health associates, p.c.