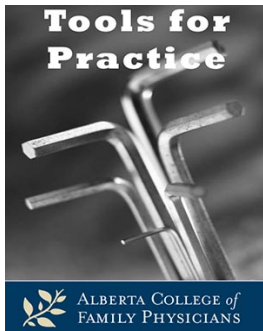


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**Reviewed: August 4, 2016**  
**Evidence Updated: Updated Cochrane review**  
**Bottom Line: Minor change**  
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## **Antihistamines for the Common Cold: Facts on a Possible Fix?**

**Clinical Question: Are antihistamines effective in treating symptoms of the common cold?**

**Bottom Line: Antihistamines alone have little meaningful impact on the common cold. Weak evidence suggests antihistamine-combination products improve global symptoms of the cold for one in every four to seven treated. "Cough and cold" products should not be used in children under six.**

**Evidence:** Four systematic reviews of antihistamines alone and one of antihistamine combination.

Antihistamines alone:

- Cochrane<sup>1</sup> review of 18 Randomized Controlled Trials (RCTs) including 4,342 patients: Compared to placebo, antihistamines resulted in:
  - Any improvement in severity of general symptoms at days one-two: 55.3% versus 62.3%, Number Needed to Treat (NNT)=15.
    - But not at days  $\geq$ three.
  - Inconsistent, non-clinically meaningful changes in individual symptoms on four-five-point scales.
    - No change in nasal congestion.
    - Improved rhinorrhea on days two and four only: Best day two, change 0.15 (95% Confidence Interval [CI], 0.04-0.27).
    - Improved sneezing on days one-four: Best day three, change 0.31 (95% CI 0.15-0.46).
- Three other systematic reviews:<sup>2-4</sup> Similar results to Cochrane review.

Antihistamine combination:

- Cochrane:<sup>5</sup> Compared to placebo:
  - Antihistamine with decongestants (12 RCTs) improved global symptoms, NNT=4.
  - Antihistamine with analgesia (three RCTs) improved global symptoms, NNT=4-7.

- Antihistamine with decongestant and analgesia (five RCTs) improved global symptoms, NNT=6.
- The included studies did not compare these combinations to products without antihistamines to assess the contribution of antihistamines on symptom improvement.

**Context:**

- Estimated 40% of time lost from work is attributable to the common cold.<sup>6</sup>
- All of the studies reported are at high or unclear risk of bias.<sup>1,5</sup>
- Adverse events were poorly reported, but more common with antihistamines versus placebo, Number Needed to Harm (NNH)=34.<sup>1</sup>
  - Combination therapies may increase adverse event rates.<sup>5</sup>
- Benefits seen in antihistamine combination products likely arise from the additive effects of two-three products with minimal individual effects.
- Health Canada<sup>7</sup> recommends against using over-the-counter cold medicines in children under age six because:
  - Children do not benefit from antihistamines alone<sup>1</sup> or in combinations.<sup>5</sup>
  - Antihistamines and “cough and cold preparations” are second and sixth (respectively) most common substances involved in (age ≤five years) pediatric deaths.<sup>8</sup>

**Original Authors:** Anu Joneja MD CCFP, G. Michael Allan MD CCFP

**Updated:**

Ricky Turgeon BSc(Pharm) ACPR PharmD

**Reviewed:**

G Michael Allan MD CCFP

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