Z-pak: The #1 Antibiotic for the Common Cold

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I am constantly amazed at the efficacy of the Z-pak for the Common Cold. The treatment has withstood the test of time and continues to be the go-to treatment for ER, urgent treatment, and primary care settings. Every day, thousands are rescued from the grips of their virus with this miracle antibiotic. They present at our doorsteps with severe symptoms of cough, congestion, AND runny nose. How is one expected to withstand such a symptomatic conflagration? Thankfully, they leave with a 5 day course of miracle and within 5-7 short days, the patient is once again symptom free. All you can say is WOW...thank you modern medicine.

We keep hearing that the Z-pak is an antibiotic and that antibiotics don't treat viruses, but the Z-pak demonstrates super powers that allow it to leap tall buildings in a single bound. This must be the case or we wouldn't be writing it like we were on payroll. Patients swear by it as well. The number of times I hear, "I usually get a Z-pak and in 5 days I'm feeling better". That's a testimony right there and justification for our efforts that may or may not have contributed to the drug resistant bacteria that now frequent our halls.

Granted, I realize that the symptoms would have resolved in 5-7 days without the Z-pak, but I believe this is much more a representation of our "got to do something" healthcare environment. When you combine patient expectations with the virtual Biblical like doctrine of patient satisfaction surveys, it's hard to fall back on the "tincture of time". Our patients feel like they have to do something, especially if they made the effort to see a healthcare provider. The power of the script, no matter what it is, represents a therapy in itself. The antibiotic just represents the "easy button", it fulfills the need for a script, the patient's belief that they actually need an antibiotic, and our inner fear that the patient may be the one in a huge number that actually has a bacteria of significance.(insert CYA medicine)

In the end, we continue to carpet the sick with unnecessary antibiotics and subject the world to ever increasing strains of resistant infections, all in the name of patient satisfaction, laziness, and outdated practice. Until we shelf the "easy button" and take some time to educate and address symptoms, then we will continue to propagate the ongoing dependence of antibiotics for viral syndromes. Let us treat viruses as viruses and save the Z-pak for its designed goal, fighting and killing bacteria. Like a jockey playing professional basketball, let's not make something that's great at what it does do something for which it is not well suited.