



Chronic Cough

Chronic cough is not a disease in itself, but rather a symptom of an underlying condition. Chronic cough is a common problem. Only a doctor can tell for sure the cause a chronic cough. In a 2006 study of women who had a cough lasting for six months, 39% were found to have asthma, 9% had chronic upper airway cough syndrome (commonly known as postnasal drip), and 9% had gastro-esophageal reflux disease (GERD). In addition, another 11% had chronic obstructive pulmonary disease (COPD), a serious, progressive disease that includes both emphysema and bronchitis.

In children, more than 12 million visits to the Pediatrician are due to coughs every year. Most coughs last a few days and are the result of a common cold. It is frustrating for both the parents and child if a cough is present for weeks and results in sleepless nights for all.

Protective

At its core, coughing is not a bad thing. It is actually an important protective mechanism of the lungs. Cough helps guard against aspiration and assists in the removal of secretions from the airways. Chronic cough results when cough receptors are constantly triggered by various stimuli. Cough receptors are located in the nose, sinuses, larynx, pharynx, airways, ear canal and diaphragm.

Chronic Cough Causes

Chronic cough can be caused by a variety of conditions such as:

- Post-Nasal Drainage which in turn could be due to several factors, including allergies.
- Cough variant asthma: Chronic cough may be the sole manifestation of asthma. It is the most common cause of chronic cough in children. Cough occurs day and night and is often precipitated by excessive cold air, common cold or flu.
- Viral or bacterial pneumonia can produce chronic cough.
- Sinusitis, which presents as post-nasal drip, yellow or greenish mucous, facial pain, foul odor of breath, and sore throat, can be a cause for chronic cough.
- Gastro-Esophageal Reflux Disease (GERD).
- Vocal Cord dysfunction.
- CIGARETTE SMOKING: There is a direct association between chronic cough and cigarette smoking. In general, the rate of cough increases with the number of cigarettes smoked. Also, there is a clear association of chronic cough and passive smoking. Children who have parents who smoke in the home have more respiratory disease. Even if you smoke only in one room, the smoke spreads all through the house.
- Habit cough, also known as psychogenic cough. This type of cough is characterized by a single dry repetitive cough. Habit cough typically occurs only during the day and disappears during sleep. It may be precipitated by anxiety.
- Other causes, like cystic fibrosis, congenital malformations, and foreign body aspiration can cause chronic cough in children.
- Medications: Certain medications used to treat high blood pressure may cause chronic cough.

Chronic Cough Treatments

Recognizing the specific cause, and elimination or treatment of the cause, could result in improvement of chronic cough. Diagnostic testing may include allergy skin testing, lung function testing known as spirometry and GI evaluation for GERD.

Chronic cough treatment aims to eliminate the underlying cause. Each type of treatment is tried separately, one after another, until the cough is resolved. Seeing which treatment works best helps to figure out the underlying cause. Here are some examples of treatment choices for different causes of cough.

For Postnasal Drip:

If your cough is related to postnasal drip, it may improve with the use of a decongestant, nasal or oral antihistamine, or a nasal spray. The best chronic cough treatment (or combination of treatments) depends upon your chronic cough symptoms and medical history. As an example, if you have nasal allergies, medications are chosen to control allergy symptoms.

- Oral antihistamines — Antihistamines that are taken as a pill can sometimes cause side effects such as drowsiness and drying of the eyes, nose, and mouth. Most oral antihistamines are available over the counter. (Antihistamines that are less likely to cause sleepiness, such as Claritin [Loratadine] or Allegra [Fexofenadine] are also less likely to help with cough.)
- Decongestant — A decongestant that improves nasal congestion could help lessen postnasal drip symptoms.
- Nasal antihistamines — Prescription nasal antihistamine sprays can relieve symptoms of post-nasal drip, congestion, and sneezing.
- Nasal sprays — Nasal sprays like Atrovent (Ipratropium Bromide) can relieve runny nose, postnasal drip, and sneezing.
- Nasal steroids — Nasal steroids are the mainstay in the treatment of postnasal drainage due to allergies.

For Cough Variant Asthma:

If your cough is due to asthma, you will be given the standard treatment for asthma, which includes an inhaled bronchodilator, like Albuterol, and inhaled glucocorticoid, like Pulmicort or Flovent.

For Acid reflux:

If you are overweight, lose weight. Stop smoking. Avoid eating for two to three hours before lying down. Elevate the head of the bed three to four inches.

For Eosinophilic bronchitis:

Eosinophilic bronchitis is treated with inhaled glucocorticoids, like Pulmicort or Flovent. These medications are also used for asthma and work to decrease inflammation in the airways.

If you have questions about Chronic Cough, feel free to contact our office at 614-760-0099. One of our staff would be happy to answer your questions about Chronic Cough and discuss different treatment options offered at Allergy & Asthma Clinics of Ohio.