

Chronic Cough



Patient Information Leaflet and
Tips on Cough Suppression

What is chronic cough?

Chronic cough is a persistent cough lasting eight weeks or more. Many report it to be a dry cough with an irritation or tickling sensation; this is quite common but can be distressing. The cough can be triggered by talking, laughing, certain strong smells/irritants and/or changes in temperature.

Chronic cough can lead to other problems including poor sleep, headaches, disordered breathing, exhaustion, depression, stress incontinence, and fear of being out in public.

A cough is your body's way of responding when something irritates your throat or airways. An irritant stimulates nerves that send a message to your brain. The brain then tells muscles in your chest and abdomen to push air out of your lungs to force out the irritant.

One of the most important steps your healthcare professional will take is to rule out more worrying causes of a chronic cough. This can usually be done by having a clinical assessment and an X-Ray of your lungs.

What causes chronic cough?



Once you have had other important causes of chronic cough ruled out following assessment from your healthcare professional, the following are some of the common conditions associated with chronic cough. In many cases, there may be more than one cause.

Smoking: One of the most common causes of a chronic cough. Cough may also increase after stopping smoking as nicotine can suppress your cough reflex. This can be improved with nicotine replacement therapy available through most local pharmacies.

Gastro-oesophageal reflux disease (GORD) and laryngopharyngeal reflux (LPR): Acid from your stomach rises up the oesophagus and tips over onto the vocal cords irritating the back of the throat.

Post-nasal drip: Excess mucous from your nose/sinuses drips down the back of your throat.

Asthma: Cough variant asthma can present with cough as the main symptom.

Infections: A cough can remain even after other symptoms of a cold, throat infection or chest infection have gone.

What causes chronic cough?

Continued

Medications: Angiotensin-converting enzyme (ACE) inhibitors are commonly prescribed for high blood pressure and heart failure and can cause a chronic cough as a side effect in some people.

Obesity: This is a common cause of chronic cough separate to the conditions listed above but will often be a factor along with other causes.

In some cases, there is no obvious cause. Some people have a very sensitive cough reflex which does not easily respond to treatment of accompanying conditions. This is often referred to as cough hypersensitivity syndrome.

If the cause of your chronic cough is not clear, your healthcare professional may trial various treatments for the causes of cough described above to see if there is any improvement in your symptoms.



What happens when you cough?

When you cough, your vocal cords are struck together forcefully. The vocal cords may become irritated and this can cause more coughing. This can lead to the increased production of mucus which can trigger even more coughing, in a cycle which can be difficult to break. The more we cough the more the trachea (windpipe) becomes inflamed and swollen making us cough more. This can lead to anxiety and again further worsen the cough. The habit of coughing in response to minor throat irritation may worsen over time.

How to control your cough?

The following strategies will help you suppress the cough by keeping the vocal cords apart. Practise them during the day (try to do 5 repetitions, 20 times a day) so you are ready to use them when you feel a cough coming on.

The first step is to identify any sensations that come from the throat right before the episode starts. It may be a tickle or scratchy sensation.

As soon as you experience the sensation above, try the 'hold, blow, sip, swallow' technique.



Hold, blow, sip, swallow



- 1 Hold your breath for the count of 5.**
- 2 Blow the air out of your mouth through pursed lips (as if blowing out candles).**
- 3 Sip some water.**
- 4 Swallow whilst your chin is tucked down towards your chest.**

Other strategies you could try:

- Sniff in twice in quick succession, short and sharp (so you hear noisy air) then blow out gently through tightly pursed lips, with your shoulders relaxed. Don't push or strain from the throat.
- Tongue press – press the sides of your tongue to your top teeth holding for 3-5 seconds.



Looking after your throat



The following strategies may decrease the sensitivity and irritation that has built up in your throat due to prolonged coughing.

- Sip water frequently throughout the day, sipping every 15 minutes to keep your throat moist. Aim to drink about 2 litres of water each day.
- Avoid caffeine and alcohol (which can dry the throat out).
- Try steam inhalation for 10-15 minutes (or as long as you can tolerate) every day. Place your head over a bowl of steaming water from the kettle, put a towel over your head and breathe in and out through your nose.
- Practice breathing in through your nose. Nasal breathing reduces the irritating effect of dry cold air on the throat.
- Avoid medicated cough lozenges as they can dry your throat out. Try sucking on non-medicated lozenges, chewing gum or honey which increase swallow frequency and can have a soothing effect.
- You can also try sucking on ice cubes or frozen grapes.

It is important to recognise there is no 'quick fix'. You will need to practice the techniques that work best for you regularly when you are not coughing, little and often, so you are ready to use them when you feel a cough coming on. In time you will learn to control the cough before it starts.

