

Patient information

Chronic cough

What is chronic cough?

A chronic cough is a cough that persists for 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 smells/irritants or sudden changes in temperature.

What causes chronic cough?

Main causes

- **Post nasal drip:** Excess mucus from the nose / sinuses that drips down the back of the throat and causes an irritation and the feeling of needing to cough and clear this.
- **Reflux (gastro-oesophageal reflux disease or laryngopharyngeal reflux):** Acid rises from the stomach up the oesophagus and this can then tip over on to the vocal cords causing an irritation and coughing. Lifestyle / dietary alterations, postural care and medications are the best treatments for this. You may wish to receive further advice from your GP.
- **Asthma:** Coughing may not happen all the time but it can be triggered by breathing in cold air or certain smells / chemicals.

Other causes

- **Infections:** A cough may remain following an illness such as a cold, whooping cough can also cause chronic cough.
- **Medications:** Coughing can in some cases be a side effect of some medications such as angiotensin-converting enzyme (ACE) inhibitors, commonly prescribed for high blood pressure and heart failure. It may be beneficial to discuss with your GP about any possible changes to your medications.

Common triggers

- Change in air temperature
- Aerosols, sprays, perfumes and cleaning substances
- Pollen and dust
- Dryness
- Viral infections
- Physical exercise

How is chronic cough treated?

Depends on the cause and will need to treat that first, if this persists then strategies and techniques to control the cough are discussed.

How to control your cough

- Stop smoking
- Reduce acid reflux
- Avoid allergens

The first step in breaking the cycle of coughing is to identify any sensations that come from your throat right before your episodes start. It may be a tickling or scratchy sensation, or it may be a catching or closing sensation.

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

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

Take another sip of water immediately afterwards. This will soothe the larynx and help to thin out any mucus that has accumulated in your throat. This means you need to carry water with you at all times and make a habit of sipping water every 15 minutes to help to keep your throat moist.

An alternative to the ‘hold, blow, sip, swallow’ technique is to substitute the behaviours you carry out right before your episodes start with a different action, e.g. if you identify you always raise your hand to your mouth prior to coughing, commit to not doing this – maybe open your fingers out wide instead, or carry out any other alternative movement.

Other strategies that you could try:

- Silent huff
- Swallow your saliva
- Distraction (count from 10 - 1, do a jigsaw ...)
- Two sniffs in quick succession
- Yawn sigh
- Put tongue between teeth and swallow
- Put tongue to roof of mouth and swallow
- If you hear someone else cough – swallow
- Some patients think it is a good idea to keep a diary of how many times they have coughed during each day. This can provide a measure of how well you are controlling the symptoms with this technique.

Notice every cough. In time you’ll be able to begin to control the cough before it starts. You may wish to ask your family and friends to help you remember and remind you when you are not using the technique.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (formerly DisabledGo)
<https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>

