Controlling chronic cough

This leaflet is about chronic cough. It tells you what causes you to cough and some of the things you can do to control it. If you have any further questions or concerns, please do not hesitate to speak to your speech and language therapist (SLT).

What is chronic cough?
In adults, chronic cough is a persistent cough (when you feel the need to cough over and over again) lasting eight weeks or more.

With a chronic cough, you may also experience the following:

- a runny nose
- postnasal drip (when excess mucous from your nose or sinuses drips down your throat, causing you to cough)
- throat clearing
- hoarseness (when your voice changes and becomes crackly or rough)

Chronic cough can be annoying and can also affect your sleep, leaving you exhausted.

What causes it?
The ear, nose and throat (ENT) doctor has examined your larynx (voice box) and checked that nothing is seriously wrong.

In many cases, more than one cause is involved in chronic cough.

Main causes

- **Postnasal drip**: As explained above, this is when excess mucous from your nose or sinuses drips down the back of your throat and causes you to cough.

- **Asthma**: A cough related to asthma (a condition affecting your airways) may not happen all the time. It can be triggered by breathing in cold air or certain chemicals or fragrances. In one type of asthma (cough-variant asthma), a cough is the main symptom.

- **Gastro-oesophageal (GORD) and/or laryngopharyngeal reflux (LPR)**: When acid from stomach refluxes (leaks) into your voice box and/or oesophagus (the tube that carries food from the throat to the stomach) this can lead to irritation which causes chronic coughing.

Other causes

- **Infections**: A cough can remain after most symptoms of a cold have gone. Whooping cough (a bacterial infection of the lungs and airways) can also lead to chronic coughing.
**Blood pressure drugs:** Angiotensin-converting enzyme (ACE) inhibitors, commonly prescribed for high blood pressure and heart failure, can cause a chronic cough in some people.

**Chronic bronchitis:** Long-standing swelling and reddening of your major airways can cause congestion, breathlessness and a chronic cough. Most people with this condition are smokers or have smoked.

When you cough, your vocal cords, which are in your voice box, are struck together forcefully. This may irritate the mucous membrane and cause more coughing. After repeated episodes of coughing, the mucous-producing glands in the membrane may increase mucous production to protect the vocal cords from damage. The sensation of thick, heavy mucus on your vocal cords may be enough to trigger another bout of coughing. This creates a ‘vicious cycle’, which may be difficult to break.

The habit of coughing in response to minor throat irritation may have become very strong. You may have had the habit for a long time. When you have these bouts of coughing, you may worry that something is seriously wrong. This can make you anxious and sometimes chronic cough gets worse when you are stressed.

**How is chronic cough treated?**

The treatment of chronic cough will depend on what has caused it. You may be advised to take one of the following medicines:

- antihistamines (to prevent the effects of allergies)
- decongestants (to relieve a blocked nose)
- inhaled asthma drugs
- antibiotics (to treat bacterial infections)
- antacids (to neutralise the acids in your stomach so reflux does not cause a cough)
- cough suppressants (to block the cough reflex and prevent you from coughing).

If you take ACE inhibitor medication (often prescribed for heart failure or blood pressure), this may be swapped to an angiotensin-receptor blocker, which doesn’t have cough as a side effect.

**How to control your cough**

There are certain things you can do to try and control your coughing. Try following the instructions below. If there is no change, or your coughing gets worse, speak to your speech and language therapist. They will be able to give you more information and advice.

- avoid allergens (for example, dust, pollen or animal fur)
- stop smoking (ask your GP for information about local services)
- reduce acid reflux by changing your diet (ask for a copy of the leaflet Acid reflux)
- keep a diary of how often you cough during the day and what the triggers are.

**Try the Hold, Blow, Sip, Swallow technique**

Identify the sensations you have in your throat just before you start coughing. Is it a scratching, tickling, catching or a ‘closing’ sensation?
The moment you experience the sensation…

- **Hold** your breath for a count to five – 1,2,3,4,5
- **Blow** the air out of your mouth as if blowing candles.
- **Sip** some water.
- **Swallow** while tucking your chin down towards your chest.

Take another sip of water immediately. This will soothe the voice box and help thin out the mucus that builds up in your throat. Make a habit of sipping some water every 15 minutes or so to keep your throat moist.

**Other strategies to try**
- Try two strong sniffs in quick succession.
- Try a strong sniff followed immediately by blowing out through pursed lips.

In time you will be able to begin to control the cough just before it starts. Ask your family and friends to help remind you when you are not using the technique.

**Contact us**
If you have any questions or concerns, please contact the Speech and Language Therapy Department at **Guy’s Hospital** on **020 7188 6233** or at **St Thomas’ Hospital** on **020 7188 6240**, Monday to Friday, 9.30am to 5pm.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

**Useful sources of information**

**Pharmacy Medicines Helpline**
If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.
**t:** 020 7188 8748 9am to 5pm, Monday to Friday

**Your comments and concerns**
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.
**t:** 020 7188 8801 (PALS)  **e:** pals@gstt.nhs.uk
**t:** 020 7188 3514 (complaints)  **e:** complaints2@gstt.nhs.uk

**Language Support Services**
If you need an interpreter or information about your care in a different language or format, please get in touch:
**t:** 020 7188 8815  **e:** languagesupport@gstt.nhs.uk

**NHS 111**
Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.
**t:** 111
NHS Choices
Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.
w: www.nhs.uk

Get involved and have your say: become a member of the Trust
Members of Guy’s and St Thomas’ NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, and to become a member:
t: 0800 731 0319   e: members@gstt.nhs.uk
w: www.guysandstthomas.nhs.uk/membership