



Chronic Cough

There are several different causes for chronic cough. Chronic cough means the cough has been present for more than three months. It may be difficult to determine the exact cause. Chronic cough may be generated in the upper and or lower respiratory tract.

The lower respiratory tract includes the lungs and lower respiratory air passages. With a lower respiratory tract cough, one will usually sense the cough being generated in the chest. In this situation, you may need a chest x-ray or chest CT scan. A form of asthma called cough variant asthma may present with just a chronic cough. There may be no shortness of breath or wheezing. Treatment includes inhalers and corticosteroids. Pulmonary function tests or a methacholine challenge test may be necessary to diagnose this problem.

High blood pressure medications called ACE-inhibitors may have cough as a side effect. These medications include benzapril, captopril, enalapril, fosinopril, perindopril, quinopril, ramipril, and trandolapril. You may need to change your blood pressure medication to a different class. When these medications are stopped, it may take 4-6 weeks for the cough side effect to resolve.

There are other reasons for a chronic lower respiratory cough. These include eosinophilic bronchitis or an infectious chronic bronchitis. All of these problems may be best evaluated and treated by your primary care physician or a lung specialist called a pulmonologist.

An ear, nose, and throat physician will primarily see patients with chronic cough that seems to be a throat generated cough. It may be severe. Patients have frequent coughing episodes that may cause shortness of breath, choking, and retching. It may occur almost on a continuous basis and may be associated with constant throat clearing. It may affect the quality of sleep. Some will think it is due to posterior nasal drainage. If patients have other very bothersome nasal symptoms, it is a possibility. These symptoms include frequently clearing thick and or colored nasal mucous. If this is not the case, it is not common for a subjective sense of posterior nasal drainage to cause such a severe throat generated cough.

One of the common reasons for a throat generated cough is stomach content reflux irritating the throat. This may be acidic or non-acidic. People may not have any sensation of heartburn. Treatment is with medications called proton pump inhibitors. These medications include Prilosec, Nexium, Aciphex, and Prevacid. These medications are taken once or twice a day 30 minutes before breakfast and dinner. Proton pump inhibitors should be taken a minimum of four months before deciding if the medication is or isn't helpful. Gaviscon is an over the counter medication which may be helpful. It is taken after meals and before bedtime. This medication puts a cap over stomach contents to hopefully control reflux.

Another common reason for a throat generated cough is a hypersensitive throat. This is a nerve reflex generated symptom. Treatment is an attempt to calm down nerves that cause this constant cough. Nortriptyline or Elavil taken before bedtime may help. Feeling tired and dry mouth are side effects. However, when the cough is severe, these may not be helpful. Gabapentin (Neurontin) may be very helpful for this problem. It is an anti-seizure medication that is used for other nerve generated symptoms. It is started at a low dose and increased gradually. It may be prescribed up to three times per day. It is increased to a maximal dose or lowest effective dose. Feeling tired may be a side effect. If any of these medications are helpful, they may be required on a long term basis to control the cough.