

If you would like further information, please discuss with the speech and language therapist based in the following areas:

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<p>Speech and Language Therapy Department Queen Margaret Hospital Whitefield Road Dunfermline KY12 0SU Tel: 01383 623623 Ext: 23832</p>	<p>Speech and Language Therapy Department Cameron Hospital Windygates KY8 5RR Tel: 01592 226777</p>

# Chronic Cough

## Patient Information



**If you would like a copy of this leaflet in an alternative language or format such as audio tape, large print, Braille or British Sign Language please contact Angela Heyes by telephone on 01383565142 or by e-mail at [fife-UHB.EqualityandDiversity@nhs.net](mailto:fife-UHB.EqualityandDiversity@nhs.net)**

**If you require a interpreter in any community language please contact the service and it can be arranged.**

## What is chronic cough?

In adults, a chronic cough is characterised by a **persistent cough, lasting more than 8 weeks.**

A chronic cough refers to a **dry, tickly cough, or having a sensation of “something in the throat”** which you want to clear.

Chronic cough can be **annoying and distressing** to everyone, especially the person who is suffering from this condition. It can also **impact on your sleep**, leaving you exhausted.

With a chronic cough, you may also experience:

- A runny nose
- Postnasal drip (excess mucous from your nose drips down your throat, causing you to cough)
- Throat clearing
- Hoarse voice (when your voice quality changes and becomes croaky or rough)

## How can a speech and language therapist help?

Your speech and language therapist (SLT) can support you in the following ways:

- Listen to your concerns about your cough, what you want to be different, and what you want to change.
- Find out how much you understand about your chronic cough, and offer information when needed.
- Discuss what you notice is already helping your chronic cough.
- Plan a way forward with you, and establish what your preferred outcomes would be regarding your chronic cough.
- Support you to feel more in control and confident in managing your chronic cough.

Some of the content of this leaflet comes from NHS Guy's and St Thomas's *Controlling Chronic Cough* (2016), and NHS Hull University Teaching Hospital's *How to Help Chronic Cough* webpage (2016).  
Thank you.

## How is chronic cough treated?

The treatment of chronic cough will depend on what has caused it. Sometimes medications can help to reduce your symptoms. These may include:

**Please consult with your GP before making any changes to your medication.**

- **Antacids** (to neutralise the acids in your stomach so reflux does not cause a cough)
- **Inhaled asthma drugs**
- **Antihistamines** (to prevent the effects of allergies)
- **Decongestants** (to relieve a blocked nose)
- **Antibiotics** (to treat bacterial infections)
- **Cough suppressants** (to block the cough reflex and prevent you from coughing)

## How to control your cough:

For some people, making some small changes to your lifestyle can be enough to reduce your cough. These small changes may include:

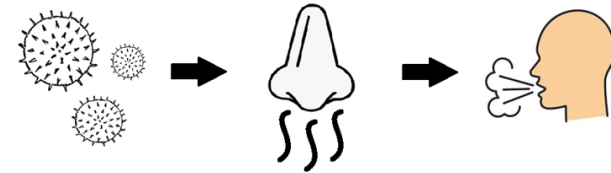
- **Avoid allergens** (i.e. dust, pollen, or animal fur)
- **Stop smoking** (ask your GP for information on local support services)
- **Reduce acid reflux** by changing aspects of your diet
- **Increase your fluid intake** - aim to have at least 8 glasses of water a day. This will help reduce dryness in the throat.
- **Keep a diary** of how often you are coughing during the day and what the triggers are.

## What causes chronic cough?

Firstly, it is important to understand why we cough.

When an irritant (e.g. dust) enters our airway, the vocal cords come together to force out the irritant.

We may also cough because we have a cold, or chest infection. It is the body's natural defence mechanism.



The cough becomes **chronic** when you need to produce a strong cough in response to a mild irritation.

This is due to **laryngeal hypersensitivity**. This means the larynx and vocal cords are over-stimulated by a mild irritation, causing a strong cough response.

## Common triggers include:

Every person is different. In many cases, there is more than one cause for the chronic cough. The main causes can be:

- **Gastro-oesophageal (GORD) and/or laryngopharyngeal reflux (LPR)** - when acid from your stomach leaks into your vocal tract, it can irritate the vocal cords, and cause a cough response.
- **Asthma** - a cough related to asthma can be triggered by breathing in cold air, or certain chemicals or fragrances.
- **Postnasal drip** - as described previously

### **Blood pressure drugs**

Angiotensin-converting enzyme (ACE) inhibitors can sometimes cause a chronic cough in some people.

**Please consult with your GP before making any changes to your medication.**

Other triggers may be:

- **Viral infections** - i.e. cold/flu
- **Pollen, dust** - try to cover your mouth and nose with scarf or dust mask.
- **Cold air** - try breathing through your nose to warm the air
- **Aerosol sprays** - try to avoid these.
- **Physical exercises** - start rhythmic breathing through the nose when you exercise.
- **Dryness** - i.e. central heating, air conditioning, hayfever, and some medications can cause dryness.
  - To help with this, try breathing through your nose to warm the air. You could also try sucking on boiled sweets, increasing fluid intake, and reducing caffeine intake.