



Patient Information Leaflet

# How to help chronic cough

**Produced by:**  
Respiratory Department

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**If you are unable to read this leaflet because English is not your first language, please ask someone who speaks English to telephone PALS on 01983 534850 for further information and help.**

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**Polish:**

Jeśli nie jesteś w stanie przeczytać tej ulotki bo angielski nie jest pierwszym językiem, poproś kogoś, kto mówi po angielsku, o kontakt telefoniczny z (PALS 01983 534850) aby uzyskać więcej informacji i pomoc

**Russian:**

Если вы не можете прочитать этот буклет на английском языке потому что не является первым языке, пожалуйста, попросите кого-нибудь, кто говорит на английском языке для телефонного (PALS 01983 534850) для получения дополнительной информации и помощи

**Turkish:**

Eğer İngilizce ana diliniz değilse, çünkü bu broşürü okumak için yapamıyorsanız, daha fazla bilgi için 01983 534850 üzerinde PALS telefon İngilizce bilen birine sormak ve yardım lütfen

**Bulgarian:**

Ако не сте в състояние да прочетете тази листовка, тъй като английският не е първи език, попитайте някой, който говори английски, за да телефонирам (PALS на 01983 534850) за повече информация и помощ

**Czech:**

Pokud nejste schopni přečíst tuto příbalovou informaci, protože angličtina není vaším rodným jazykem, zeptejte se někoho, kdo mluví anglicky na telefonní PALS na 01983 534850 pro další informace a pomoc

**Bengali:**

আপনি ইংরেজি আপনার প্রথম ভাষা না থাকার কারণে এই লফিলটে পড়তে অক্ষম হন, তাহলে আরও তথ্যের জন্য 01983 534850 নভেগিশেন PALS টেলিফোনে ইংরেজি কথা কতে জিজ্ঞাসা করুন এবং সাহায্য করুন

## **What is a chronic cough?**

A chronic cough is a constant, irritating cough that can be annoying and distressing to everyone, especially the person suffering from this condition.

It is important to understand the difference between a 'productive cough' and an 'unproductive cough'. A productive cough is one that shifts phlegm or mis-swallowed food or liquid out of the airway in order to allow you to breathe normally. Productive coughs often sound rattily or bubbly. An unproductive cough can be caused by dryness or a sensation of 'something in the throat' that does not shift with coughing but, equally, does not affect a person's ability to breathe normally. Sometimes, the larynx (voice box) continues to be 'irritated' after the major symptoms of a throat/chest infection have resolved.

If a cough persists after phlegm, food or liquid have been shifted or silent reflux irritation has reduced, it is important to learn how to control the cough otherwise it can develop into a vicious cycle that may end in fits of choking, retching or vomiting. Once the larynx (voice box) becomes irritated, there usually follows an urge to keep coughing. At this point, or even before the cough starts, it is essential to start deterring it. If not, continual coughing can damage and harden the delicate lining of the vocal cords leading to vocal cord lesions. This can affect the quality of the voice, making it sound hoarse or gruff or lower in pitch or lead to Aphonia (voice loss). Constant coughing can also cause painful soreness or tenderness in the throat or the upper chest, stomach or abdominal muscles.

## Common triggers of chronic cough

- **Cold air** – cover mouth and nose, if necessary, with a scarf.
- **Physical exercise** – start rhythmic breathing through the nose before and as you exercise.
- **Pollen, dust, aerosol sprays, strong cleaning substances, perfumes** – cover mouth and nose with a scarf or dust mask.
- **Dryness** caused by central heating, hay fever, medication and dehydration. To help this you could breathe in through your nose over a mug of boiling water for a minute for 2 to 3 times a day, sip water, suck boiled sweets, drink at least 8 glasses of water or cordial a day, or see your GP about medication for allergies.
- **Viral infections** – colds/flu.
- **Bronchitis, Chronic Obstructive Pulmonary Disease (COPD), Asthma.**
- **Medication**, e.g. some tablets for high blood pressure, heart disease, etc. can cause dry cough and some asthma inhalers can cause husky voice. Seek advice from your GP/pharmacist regarding any medications that may be causing the cough.
- Reduce the amount of **caffeine** (limit to 2–3 cups per day)/**alcohol** in your diet.
- **Acid or non-acid** reflux from the stomach, especially at night. Research shows that gastro-oesophageal reflux disease (GORD) or silent reflux can cause chronic cough and laryngeal hypersensitivity syndrome. This needs investigation from your GP.

## Cough suppression techniques

There is no 'quick fix' to stop a chronic or persistent cough, you are the best person to understand what triggers the cough and which cough suppression strategies work best for you. It is essential to practice the chosen technique(s) regularly and use them consistently in order to self-manage your cough.

The following techniques can also be used in combination or rotation. The only way to break the cycle is to keep working at suppressing the cough for as long as each bout of coughing continues.

### At the first sign of a tickle:

- 1) Put your hand over your mouth and **swallow** (keep your hand over your mouth throughout).
- 2) Take a small breath in and out through your nose.
- 3) Pinch your nose if you can and hold your breath for 5–10 counts.
- 4) Leave your hand over your mouth (and release nose if you are pinching it).
- 5) Breathe **small, quiet, careful breaths** through the nose for 30 seconds (all the time resisting the urge to cough).
- 6) Take a slow steady breath in and out of your nose.
- 7) Repeat the practice twice more or until the tickle has subsided.

## **Other methods that can help when you feel a cough coming on:**

You can use a combination of the following:

- Swallow hard.
- Cough as softly as possible in order to reduce high impact (loud) coughing as soon as it starts. This will help to reduce the chance of dysphonia (hoarse voice), or throat tenderness and soreness.
- Sniff in quickly through the nose 2 to 3 times in succession and then blow out gently through pursed lips. Blowing out through the lips channels the air and 'cushions' the vocal cords to help reduce irritation.
- As the throat feels calmer, take a sip of water or cordial but only if you are confident it will not trigger the cough again.
- Sucking an ice cube or sipping very cold water before a cough starts can sometimes prevent it.
- When blowing your nose, keep it calm and gentle so as not to irritate the upper airways.

## **Remember to**

- **Practice nose breathing as much as possible as it warms, moisturises, filters the air and delivers the air to the lungs in a calmer flow.**
- Practice these techniques even when you are not coughing. This will remind you to use the techniques when you do start coughing again.
- Keep working at suppressing the cough for as long as each bout of coughing continues. It is the only way to break the cycle.

**Note:** Discontinue and seek medical advice if you have a worsening or productive cough – especially if you are coughing coloured mucus or if you think you have a chest infection.

**If you have any queries or concerns about the content of this leaflet please call (01983) 524081 and ask to speak to the relevant department.**

If you require this leaflet in another language, large print or another format, please contact the PALS Team, telephone **01983 534850**, who will advise you.

Valuables should not be brought into the hospital. If patients have to bring in valuable items they should ask a nurse to store them safely and request a receipt for the items. You may not be able to have the valuable items returned if the time of discharge from hospital is out of hours.

We are sorry but the Trust cannot accept responsibility for loss or damage to items not given for safe keeping.

You can get further information on all sorts of health issues online at: **www.nhs.uk**

For Health advice and out of hours GP service please call the NHS 111 service on: **111**

### **We Value Your Views On Our Service**

If you wish to comment on the care which you, your relative or friend has received, we will be pleased to hear from you. Please speak to the person in charge of the ward, clinic or service in the first instance or ask them to contact the PALS Team. If you wish to contact them directly, telephone on **01983 534850**.

Alternatively you may prefer to write to:

Chief Executive  
Isle Of Wight NHS Trust  
St Mary's Hospital  
Newport, Isle of Wight, PO30 5TG

You can also share any concerns you have about our services with the Care Quality Commission (CQC) on **03000 61 61 61** or at **enquiries@cqc.org.uk**

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If you would like help and advice to stop smoking please call: Freephone 0800 169 0 169 to talk to the NHS Smoking Helpline.