

## For the Patient

The full report is titled: "Evaluation and management of chronic cough in adults." It is in the November-December 2023 issue of Allergy Asthma Proceedings (volume 44, pages 382 to 394). The author is Dana Wallace, M. D. *For the Patient* is provided to the physicians so that the patients can better understand the language of modern medicine.

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*For the Patient* is written by the editors (Bellanti, JA and Settignano, RA) and provided to practitioners so that patients can better understand the usefulness of new information resulting from medical research.

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## ALLERGY AND ASTHMA PROCEEDINGS

### Chronic cough in adults: More than an annoyance for the patient

In adults, a cough that lasts 8 weeks or longer is referred to as chronic. From a patient's perspective, chronic cough is more than an annoyance and can significantly impact quality of life. Associated symptoms include lightheadedness; sleep interruption; daytime exhaustion; and, occasionally, social isolation, anxiety, and severe depression. Chronic cough also has economic implications. In a 2018 U.S. National Health and Wellness Survey, it was found that chronic cough led to reduced productivity at work or in daily activities in 40.2%, absenteeism in 13.8%, and "presenteeism" in 34.9%. "Presenteeism" is a condition in which workers are physically present but not functioning at their best due to the cough. In a review article published in this issue, Dr. Wallace, Associate Professor of Medicine, College of Allopathic Medicine, Nova Southeastern University, Fort Lauderdale, Florida, presents an updated evidence-based approach for evaluating and managing patients with difficult-to-treat chronic cough.

### Who or What Was Proposed to Be Studied?

An extensive literature search was conducted for guidelines, position papers, systematic reviews, and clinical trials on the evaluation and management of chronic cough in adults for the preparation of this narrative review.

### How Was the Study Done?

An evidence-based and algorithmic approach for evaluating and managing patients with difficult-to-treat chronic cough was developed from literature sources. Dr. Wallace outlined the initial assessment, measurement of cough severity and quality of life, the top diagnoses (asthma, nonasthmatic bronchitis conditions, gastroesophageal reflux disease, and upper airway cough), the indications for additional laboratory testing, and empiric treatment.

### What are the Limitations of the Proposed Study?

The limitations of the review are those inherent to a report from a single study site.

### What are the Implications of the Study?

Although it can sometimes be difficult to pinpoint the problem that is triggering a chronic cough, the most common causes are tobacco use, postnasal drip, asthma, and acid reflux. Although chronic cough typically disappears once the underlying problem is diagnosed and treated, it is important to note that should the cough persist, it is advisable to consult a health-care practitioner. Treatment options can then be discussed based on the underlying condition and its relationship to respiratory infections, allergies, asthma, gastroesophageal reflux disease, or other factors. Early intervention can often lead to more effective management and an improved quality of life. □