

Cough: How to Manage It

DISCLAIMER: Please note I am not a medical professional. I spent 8 years as caregiver for my mom (2 years pre- and 6 years post diagnosis of IPF), until her passing in 2009. I have since been a PF Advocate for Patients & Families, as well as Founder and Support Group Leader of the Breathe Support Network of Groups. Information provided is from personal experience, combined with years of learning through interaction with patients, other caregivers, & healthcare professionals in the field of PF/IPF.

Many suffer with the PF cough and want to know how to manage it in order to maintain as normal a daily life as possible. Many are embarrassed by the cough and don't like to go out in public or even have family or friends over to visit. This is no way to live our precious days. Below is some information that can hopefully help you to manage your or your loved one's cough.

Your healthcare TEAM is important

Before getting into the details, please know it is very important to communicate with your healthcare team about problems with cough. While this may be the "PF cough" you or your loved one is experiencing, there could be other factors causing this and it needs to be assessed.

A cough can be dry and hacking or it may be productive, where mucus is being produced.

Mucus production can signify many causes. Some of those causes are:

- GERD (gastroesophageal reflux disease) or acid reflux
- Sinusitis or other sinus related issues (like allergies)
- Eating a diet high in greasy foods or mucus producing foods (like dairy)
- Physical problems within the mouth or throat
- Smoking
- A respiratory infection of some kind (cold, influenza, COVID, pneumonia, etc)

All of these things can cause a productive cough.

A dry – non-productive – cough is common in IPF and many other forms of PF, however a dry cough may also be present in something like pneumonia. This can happen when pneumonia is untreated and the mucus in the lungs won't break up. Once antibiotics are on board, the mucus will usually start to break up and the cough may become productive.

Never discount a dry cough. A dry cough does not necessarily mean there is no infection.

Your healthcare team can evaluate and rule out (or in) the cause (or causes) of the cough and then help find the best solutions in managing it (or treating if it is something treatable).

Why it's Important to Manage Cough

The PF cough can range from occasional and bothersome to debilitating and physically damaging to dangerous and life threatening.

An ongoing PF cough can cause patients to:

- Turn blue (from low oxygen saturation due to inability to catch their breath)
- Vomit
- Strain or tear muscles and other soft tissue
- Break ribs
- Have a tear in the esophagus
- Lose consciousness (and possibly cause physical harm to themselves such as breaking bones or hitting their head, causing a brain bleed)
- Or more – so many other things can happen due to this cough. The above list is not all inclusive.

The PF cough causes many to become homebound as they aren't comfortable being out in public, feeling as if they are disturbing others or being viewed as someone who is infectious, especially now in the COVID era. Many people automatically assume that anyone who is coughing is infected with some virus or bacteria. Strangers may even make thoughtless comments to someone who is coughing.

Ways to Minimize Cough

There are many things to try in minimizing cough – from natural remedies to prescription medications. Not everything works for every person and it may take time to find the optimal solution.

Below are some things to try. Please remember to discuss this with your healthcare team. Especially if it involves any other medication (whether that be natural, herbal, or prescription) as these can all cause drug interactions.

Additionally, there are times when it is NOT good to suppress a cough. For instance, in the case of an infection. It is usually better to cough the mucus up and out in order to get it out of the lungs. In this case, it may not be wise to try suppressing cough unless the cough has become physically harmful or dangerous.

Natural Remedies

Dietary Changes – Reducing or eliminating dairy and/or greasy foods may help minimize cough.

Adjusting oxygen liter flow – Some pulmonary fibrosis patients have found that increasing their supplemental oxygen liter flow during a coughing fit can help calm the cough. Then once the cough has calmed, they put their liter flow back on their normal maintenance setting. For those not yet on supplemental oxygen, the cough may be an indication that supplemental oxygen is necessary or would be helpful. This is something to speak with your healthcare team about.

Sipping hot water or hot tea – Sipping these hot drinks (not so hot it burns the mouth or throat) can be very soothing and help control cough. Adding honey may also help as honey seems to coat the throat and calm a cough.

Sipping “fresh” pineapple or papaya juice – Both of these juices have a natural enzyme that act as a cough suppressant. Pineapple contains bromelain and papaya contains papain. *NOTE: When processed, much of these enzymes are destroyed. Fresh is the best alternative for this.*

Speech pathology – A speech pathologist may be able to assess as to whether or not there is a physical problem in the mouth or throat that is causing or exacerbating cough. If there is, there may be corrections that can be made for this. Additionally, speech pathologists have techniques that can be used to minimize exacerbating an existent cough. The more we cough – the more we cough. This is where these techniques can be helpful – to learn how “not” to cough.

Over the Counter Remedies

Bromelain and Papain – These two enzymes found in fresh pineapple and papaya are now available over the counter in pill/capsule form.

Lozenges – There are many lozenges available over the counter that may help. Many have reported in the support groups that Fisherman’s Friend lozenges seem to work the best. *(This is not an endorsement for Fisherman’s Friend and the Breathe Support Network is not being paid or recognized in any way for this statement.)*

Cough Suppressants, Antihistamines, and Decongestants – There are many of these medications available over the counter.

Again, please check with your healthcare team before using any over the counter medications to manage cough.

Prescription Cough Remedies

When all other natural and over the counter remedies have failed, there are various prescription medications used for managing cough.

Tessalon Pearls/Benzonatate – This is a non-narcotic medication that works for some and not for others. This medication numbs the airways, the air sacs in the lungs, and also the pleura, helping to minimize cough.

Corticosteroids – These medications can reduce inflammation in the airway and also help prevent the lung from reacting to what may be triggering a cough. This is a non-narcotic medication. *Please note that ongoing use of corticosteroids can cause varied side effects, some severe, and should be managed closely and pro-actively. Please read our article “Prednisone: Long Term Effects” to learn more about these medications.*

Gabapentin/Neurontin – This medication is a treatment option for neuropathic pain. Because chronic cough has been found to sometimes be a neuropathic disorder, this medication may help in controlling cough. This is a non-narcotic medication.

Narcotics/Opiates – These medications are usually quite effective at treating cough. Narcotics interrupt the signal in the brain that triggers the cough reflex. There are various narcotic medications available, which may be helpful for those who have an allergy to one narcotic but not another. These are a controlled substance and are closely managed. They can be sedating, cause severe constipation, and can be addictive. Side effects of narcotic medications need to be pro-actively managed to ensure quality of life is not interrupted. For instance, managing potential constipation with regular dosing of a gentle laxative as a supplementation.

Recently, there have been studies on “low dose Morphine” for controlling the PF cough. This is something to talk with your clinician about, as dosing this way helps to minimize sedation. This is a link to the official paper so you can print it out and take it your clinician. I highly recommend you do this as many clinicians are against prescribing narcotics for PF cough.

[https://www.thelancet.com/journals/lanres/article/PIIS2213-2600\(23\)00432-0/fulltext](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(23)00432-0/fulltext)

This is not an exhaustive list of ways to manage chronic cough, but it gives you some ideas of where to start and how to start the conversation with your healthcare team.

It may take time to find a solution that is right for you or your loved one. Close communication between everyone involved is key to managing cough efficiently.

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