



Managing the allergic cough

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Coughing is a protective reflex action that occurs when the airway is irritated or obstructed. Its purpose is to clear the airway so that breathing can continue normally. Doctors classify coughs into two categories:

- Acute cough that lasts for less than three weeks
- Chronic cough that lasts for more than three weeks

An acute cough is usually caused by a viral infection of the upper respiratory tract, such as the common cold. Cigarette smoke is the most common cause of chronic cough, but a chronic cough may also be a symptom of postnasal drip, asthma, chronic obstructive pulmonary disease (chronic bronchitis and emphysema), tuberculosis or acid reflux from the stomach.

Postnasal drip occurs when secretions from the nose drip or flow into the back of the throat from the nose. These secretions can irritate the throat and trigger a cough. Postnasal drip can develop in people with allergies and is a symptom of allergic rhinitis. Triggers that can set-off symptoms of allergic rhinitis in people with allergies include grass and tree pollens, dust mites and animal dander.

If a patient's cough is caused by postnasal drip from allergic rhinitis, the patient is likely to have other symptoms of allergic rhinitis, such as a runny nose, sneezing, itchy nose, eyes and palate, nasal congestion and a postnasal drip. The cough worsens when the other symptoms of allergic rhinitis worsen and improves when the symptoms of allergic rhinitis are brought under control. The cough associated with allergic rhinitis is often described as a 'clearing of the throat' cough.

Treatment of the allergic cough

Treatment of the allergic cough aims to eliminate the underlying cause for the cough. Most of the time, each type of treatment is tried separately, one after the other, instead of all at the same time.

A cough related to a postnasal drip may improve with the short-term use of a decongestant, nasal or oral antihistamines or nasal corticosteroids.

Decongestants

Even though they do not cure allergies, decongestants provide relief for at least some of the discomforts of seasonal allergies, such as postnasal drip and nasal congestion. Decongestants help to shrink the blood vessels in the nasal membranes and allow the air passages to open up. Oral decongestants are no longer available on their own without a prescription, but there are several products available that contain a decongestant and an antihistamine (e.g. Demazin[®] syrup and Demazin[®] NS, Rinex[®] syrup and Rinex[®] Diffucaps).

Intranasal decongestants (e.g. phenylephrine, phenylpropanolamine) are effective in relieving symptoms of nasal congestion and may be used to shrink the nasal mucosa for a few days. However, their use is limited to short-term use only (up to five days) as use beyond this time period may result in rebound nasal congestion.

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Oral antihistamines

Antihistamines are of value in the treatment of allergic conditions. Antihistamines have been shown to be effective in reducing cough frequency and intensity during the pollen

season. Oral antihistamines such as loratadine, desloratadine, cetirizine, levocetirizine and fexofenadine are effective in the treatment of an allergic postnasal drip and are available without a prescription. The second-generation antihistamines mentioned above are less likely to cause sleepiness than the older generation antihistamines such as chlorpheniramine and are preferred for most patients.

Nasal antihistamine sprays such as azelastine can also help relieve nasal symptoms associated with allergic rhinitis.

Nasal corticosteroids

Nasal corticosteroids are the most effective maintenance therapy for allergic rhinitis. In recommended doses, they have few side-effects. Nasal corticosteroids such as beclomethasone, fluticasone and mometasone nasal sprays can be recommended to help reduce nasal inflammation, sneezing, runny nose, nasal congestion, postnasal drip and cough. These products are available without a prescription from the pharmacy. Preventative treatment should be started two weeks before the onset of the allergy season and continued until it is over.

In summary

Allergies can irritate the airways. An allergic cough may result from a postnasal drip, a common problem associated with allergic rhinitis. While decongestants may provide

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some relief of nasal congestion and a postnasal drip, recommended treatment for an allergic cough includes those medicines usually used in the management of allergic rhinitis. Maintenance therapy with a nasal corticosteroid is the most effective treatment for allergic rhinitis and should be recommended for patients with allergic rhinitis to help reduce nasal inflammation, postnasal drip as well as cough.

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