

### 3.9 Cough preparations

#### Acute Cough

## Rotherham Clinical Commissioning Group

#### Condition definition

A cough is a protective mechanism that clears the airways of irritants and obstructions, and may be involuntary (caused by mechanical, chemical or nervous stimulation, such as chest infections, smoke, foreign bodies, dust and mucus) or voluntary (a deliberate action to clear the lungs and throat). Coughs fall into two categories: productive and non-productive. Productive coughs bring up phlegm or mucus and may be described by patients as loose or chesty. Non-productive coughs are the dry, barking cough and the nocturnal tickle that can disturb sleep.

#### Who can be treated under this protocol

Patient presenting with a cough which they have had for less than two weeks and which is not accompanied by any of the referral criteria.

#### When to advise patients to contact their GP

Patients taking ACE-inhibitors.

Adults complaining of a longstanding cough (> 3 weeks) to rule out lung cancer.

Children complaining of a longstanding cough (> 2 weeks) refer to rule out asthma.

Patients producing phlegm that is rust coloured or blood stained.

Patients producing phlegm that is green or yellow who have a tendency to develop secondary infections e.g. COPD patients. (Do not refer patients who are otherwise in good health and have had the cough for less than 2 weeks).

Cough accompanied by shortness of breath, severe pain on breathing in, wheezing, fever or unexpected weight loss.

A dry cough that is worse at night.

#### Recommended Treatments

Smoking cessation referral for those patients who smoke and the parents/carers of affected children.

[Simple linctus sugar free](#) x 200mL : Adults and children over 12 years - 5mL 3-4 times a day

[Simple linctus, paediatric sugar free](#) x 200mL Child 1month to 12 years – One or two 5mL spoonfuls 3-4 times a day.

[Pholcodine SF 5mg/5ml linctus BP](#) x 200mL: Adults over 18 years; 5-10mL 3-4 times daily

#### Treatment Selection Criteria

A common cause and exacerbating factor for coughing is smoking and so all patients accessing the service should have their smoking status checked. All patients who smoke should be advised of the support services available and encouraged to access them. In the case of children the smoking status of parents or carers should be established and awareness raised that this will adversely affect the child.

All patients should be advised that antibiotics are not used to treat coughs because they are only effective in killing bacteria not viruses (this may be supported by the use of an antibiotic information leaflet available from NHS Rotherham). Therefore unless a

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secondary bacterial infection is developed, such as pneumonia, antibiotics will not be recommended. There is little evidence to suggest that cough mixtures actually work. However, patients do perceive that cough mixtures are helpful and so a supply may prevent an unnecessary doctor's appointment. A demulcent preparation such as simple linctus can be supplied as it is harmless and inexpensive if a patient feels they need treatment.

Adult patients with a non-productive cough who complain that their sleep is being disturbed by a cough can be treated with pholcodine SF 5mg/5mL linctus on a short-term basis. If no improvement in 7 days refer to GP.

#### Counselling Points

Warm drinks, bland linctuses or even sips of water can be enough to resolve a non-productive cough.

It must be stressed that coughs which persist for longer than two weeks require further investigation at the patient's GP practice.

#### Clinical Knowledge Summary Leaflet to be supplied

[Cough](#)