

Patient Information for Parents of a Child With Cough



QUESTIONS MOST FREQUENTLY ASKED

Question: My child seems to cough a lot. Is that normal?

Answer: Coughing is very common in normal, healthy children. Children less than 5 years old have four or five upper respiratory infections with cough every year. These infections are usually colds. Each cold with cough lasts for an average of 6 days but can last for up to 2 weeks. A normal, healthy child who coughs in conjunction with a cold, for less than 4 weeks, does not usually need to be examined by a doctor, unless the child has other symptoms.

Question: When should I see a doctor about my child's cough?

Answer: You should take your child to a doctor if your child has a cough and breathing difficulty, vomiting, or high fever (temperature of more than 100.5 °F). If you think your child may be choking on something like a toy or piece of food, you should seek medical help immediately. It probably is not necessary to take your child to see a doctor if the child's cough has been going on for less than 4 weeks. If the cough goes on for more than 4 weeks, you should take the child to see a doctor. A cough that persists for longer than 4 weeks may have an underlying cause that should be investigated by a doctor.

Question: Can my child be harmed by coughing?

Answer: Coughing itself is usually harmless in otherwise healthy children. In fact, it can be helpful. Even when it sounds bad, coughing is the body's way of keeping foreign material and excessive mucus from getting into the lungs. To protect the lungs from foreign matter and excessive mucus, the body has a "trigger" to cause coughing to expel these substances. The foreign matter or excessive mucus irritates special nerve endings in the respiratory tract, and this is the "trigger" that makes us cough. There are some exceptions when coughing can be harmful—for example, whooping cough in babies who are unable to cough effectively.

Question: Will coughing damage my child's lungs and chest?

Answer: No. In children who are otherwise healthy, coughing itself does not damage your child's lungs or chest.

Question: Should I let my child run, jump, and play while coughing?

Answer: If your child is otherwise well and has nothing more than a cough, you should allow your child to play as usual and not restrict activities. The exercise is good for your child. Even though the child may cough more while playing, the coughing will not do any harm.

Question: Is my child's cough contagious for other members of my family?

Answer: In most cases, a child's cough is not a contagious risk for anyone else. There are some causes of cough that can be spread to others in infectious droplets expelled from the lungs by coughing—for example, tuberculosis and whooping cough. Children who are immunosuppressed (such as children with HIV/AIDS or children receiving treatment for cancer) should be kept away from a child with a cough.

Question: Will coughing cause my child to choke?

Answer: If your child is otherwise well, coughing will not cause the child to choke. Coughing may be a risk for choking in young babies with whooping cough or in children who do not have normal airway protective mechanisms—such as children with cerebral palsy.

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Question: Will coughing cause my child to die from sudden infant death syndrome?

Answer: If your child has a cough and no other conditions, there is no danger that the child will die from sudden infant death syndrome.

QUESTIONS ABOUT THE CAUSES OF COUGH IN CHILDREN

Question: What could be making my child cough?

Answer: Your child may cough for one or more reasons. The most common cause for coughing in children is called a postviral cough. This is a cough that lingers for 1 to 4 weeks after a cold or other upper respiratory infection has gone away. Other conditions can cause *chronic* cough, which is a cough that lasts for more than 4 weeks. If your child's cough lasts for more than 4 weeks, you should take the child to see a doctor. You should also consult a doctor if your child has breathing difficulties, high fever, or if you believe the child may be choking on something. There are many reasons for breathing difficulties that should be investigated by a doctor. One of the most common of these reasons is asthma.

Question: How do I know if my child's cough is caused by asthma?

Answer: If your child does not have shortness of breath or wheezing with normal daily activities, it is unlikely that the child has asthma. Most cough in children is *not* caused by asthma. Asthma medications may be helpful in some children but only after the child has been seen by a doctor and the proper medication has been prescribed. If your child is placed on asthma medications and the cough does not improve within 2 to 4 weeks, your child does not have asthma, and the medications should be stopped. If the cough improves, this does not necessarily mean that your child has asthma. The doctor may take the child off medication for a while to see if the cough returns. If the cough returns very quickly after medication is stopped, it is likely that your child has asthma.

Question: Could my child's cough be caused by gastroesophageal reflux disease (GERD)? I have heard about GERD as a cause of cough in adults.

Answer: Other conditions are more likely than GERD to cause a child's cough. These include exposure to tobacco smoke and pediatric bronchitis. Tobacco smoke is known to be especially potent in causing irritation and inflammation of airways.

Question: Can my child's allergies be causing cough?

Answer: A child with allergies may have a cough, but allergy alone is probably not the cause of cough. The child's doctor may prescribe an allergy medication for a trial period of about 2 weeks to see if this makes the cough go away. If the cough continues after 2 weeks of allergy medication, it is unlikely that allergy causes the cough.

Question: What is croup and a "barking-type" cough?

Answer: Croup is a common upper respiratory illness in children, usually caused by a viral infection. Acute cough, a "barking-type" cough, and stridor (a sharp, high-pitched sound when the child gasps for breath) may or may not be present, depending on the severity of the croup. A "barking-type" cough can also be present in children who have tracheomalacia, an underlying structural abnormality of the main airway.

QUESTIONS ABOUT THE TREATMENT OF COUGH IN CHILDREN

Question: What will a doctor do to find out why my child is coughing?

Answer: If the cough lasts for longer than 4 weeks, your child should have a chest x-ray. A child about 5 years old or older should have a spirometry test that measures how much air your child can breathe in and blow out. This is called a lung function test. The doctor may order other tests depending on other symptoms and the results of the first tests. The doctor may also refer your child to a pulmonologist (chest specialist) for additional tests.

Questions Most Frequently Asked

Question: What can I do to help my child's cough?

Answer: You can help by keeping your child away from tobacco smoke and other pollutants, such as wood smoke from a stove or fireplace. Tobacco smoke has been proven to increase coughing in children. You can also help by finding out, with a doctor's examination, what is causing your child to cough.

Question: Should I treat my child's cough with cough and cold remedies I can buy without a prescription?

Answer: Nonprescription cough and cold remedies are not useful in children and may even be harmful in some circumstances. You should never give them to children who are less than 1 year old. You should never give your child a cold medication prescribed for an adult member of your family. Adults and children have different responses to many medications. Prescription cold medications used by children should be child-specific.

Question: My child does not sleep well because of coughing. What should I do?

Answer: Menthol rubs may be soothing and help to put the child to sleep. If the child coughs while sleeping, do not wake the child up; the child is in no danger. Nonprescription sleep medications are generally not helpful.

Question: Will a doctor give my child antibiotics to treat a cough?

Answer: If your child has a "wet" cough (one that brings up thick mucus) for longer than 3 weeks, antibiotics may be useful to treat an underlying infection. Antibiotics are usually not useful for a "dry" cough that has lingered for less than 3 weeks.

Question: My child is now a teenager. Is a teenager with a cough treated like a child or like an adult?

Answer: As a rule, if a child is more than 14 years old, cough is treated the same way as for an adult. Child-specific treatment should be used for children under 14 years. Children's illnesses, in general, differ from those in adults, so child-specific treatment should be used.

QUESTIONS ABOUT INFORMATION SOURCES ON THE INTERNET

Question: Can I get good information from the Internet about causes and treatment of my child's cough?

Answer: When you look for information on the Internet and World Wide Web, you want to be sure that the information you find is the most accurate and up-to-date available. For information about causes and treatments of cough, the most accurate and up-to-date information is available at: www.chestjournal.org/cgi/reprint/129/1_suppl/1S. This *CHEST* journal Web site, of the American College of Chest Physicians (ACCP), gives you access to the "Executive Summary" of the ACCP clinical practice guidelines for diagnosis and management of cough. (ACCP members have access to the complete supplement online.) Information for these guidelines was gathered from nearly 1,000 scientific and clinical papers, published in top medical journals and reviewed by a panel of medical experts on diagnosis and treatment of cough.

You may also visit the ACCP Web site at www.chestnet.org.

Other Web sites of medical professional organizations are:

American Academy of Pediatrics
www.aap.org/

American Academy of Family Physicians
www.aafp.org/