Tower Bridge Hospital London

Tower Bridge Hospital London
97–99 Whitechapel Road, London E1 1DT
020 7916 0029 · Open 7 days, 9am–7pm
towerbridgehospital.co.uk

PATIENT INFORMATION · RESPIRATORY

Chronic cough
three weeks is the trigger to be seen

Most coughs after a viral infection last up to three weeks, and some linger to eight. A cough that persists beyond that is a chronic cough, and it almost always has an identifiable and treatable cause — usually one of three, and occasionally something that needs finding quickly.

Seek urgent assessment if you have a cough with

- **coughing up blood**
- **unexplained weight loss**, or drenching night sweats
- **increasing breathlessness**, or chest pain
- a **hoarse voice lasting more than three weeks**
- **difficulty swallowing**, or a lump in the neck
- a cough in a **current or former smoker over 40** that has changed in character

A persistent cough is the commonest presenting symptom of lung cancer and of tuberculosis, both of which are more common in East London than the national average. Three weeks is the threshold at which a chest X-ray becomes appropriate. In an emergency call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

The three commonest causes

- **Upper airway cough syndrome** — post-nasal drip from rhinitis or sinusitis. A sensation of mucus at the back of the throat, frequent throat clearing, worse on lying down. Treated with a steroid nasal spray used correctly and saline rinsing.
- **Asthma and cough-variant asthma** — cough may be the **only** symptom, with no wheeze at all. Typically worse at night, in cold air, with exercise or with allergens. Responds to inhaled steroid.
- **Reflux** — acid or non-acid reflux irritating the throat, often **without any heartburn**. Worse lying flat, after meals, and on talking. Treated with acid suppression and lifestyle change over several weeks.

These three account for the majority of chronic cough in non-smokers with a normal chest X-ray. More than one is frequently present at the same time, which is why treating only one gives partial improvement.

Check your blood pressure tablets

ACE inhibitors — ramipril, lisinopril, perindopril and others ending in -pril — cause a persistent dry, tickly cough in up to one in five people taking them. It can begin weeks or even months after starting, which is why the connection is so often missed, and it does not respond to any cough treatment. Switching to an alternative class resolves it, though it can take up to four weeks to settle. If you take one of these and have an unexplained cough, raise it before embarking on investigations.

Other causes worth considering

- **Smoking**, and COPD or bronchiectasis
- **Whooping cough** — the hundred-day cough, now circulating again in adults
- **Tuberculosis**, particularly with weight loss, night sweats or relevant travel or contact history
- **Heart failure**, causing cough and breathlessness worse on lying flat
- **Occupational and environmental exposure** — dust, fumes, mould, damp housing
- **Chronic cough hypersensitivity** — a sensitised cough reflex triggered by talking, laughing, cold air or perfume, often after a viral illness

What investigation involves

- A careful history — timing, triggers, sputum, medication, occupation and travel — which identifies the cause more often than any test
- **Chest X-ray** for any cough persisting beyond three weeks
- **Spirometry**, and tests of airway reactivity where asthma is suspected
- **Blood tests**, including inflammatory markers and, where indicated, TB testing
- Trials of treatment, each given an adequate period before being judged — typically four to eight weeks
- ENT assessment or CT where the picture is not straightforward

Self-help while the cause is treated

- Stop smoking and avoid smoky, dusty environments.
- Honey and lemon in warm water is as effective as most cough medicines, and cheaper. Never honey under one year old.
- Sip water frequently; a dry throat perpetuates the cough reflex.
- Raise the head of the bed if reflux or post-nasal drip is likely.
- Cough suppressants have weak evidence and are not recommended for children under six.

Why come to us. A cough lasting more than three weeks warrants a chest X-ray, and getting one should not take weeks. We can see you the same day, seven days a week, take a proper history, perform spirometry and take bloods in-house including TB testing, and arrange a chest X-ray rapidly through our CQC-registered imaging partners with the result explained by a clinician. If the cause needs ENT or respiratory input, we have both without a referral.

Cough over three weeks? Seen and X-rayed quickly

Same-day appointments, bloods and spirometry in-house. Seven days a week.

Book an appointment

or call 020 7916 0029

Where to get help

Tower Bridge Hospital London
97–99 Whitechapel Road, London E1 1DT

020 7916 0029

WhatsApp **07903 284 189**
info@mhwclinic.co.uk
Open 7 days, 9am–7pm

In an emergency
Call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

When we are closed and it is not an emergency
Call NHS 111 or visit 111.nhs.uk.

Related: **Urgent Care** · **ENT (Ear, Nose & Throat)** · **Blood Tests** · **Private GP Services** · **All patient leaflets**

Written and reviewed by Dr H Bolat, GP & Clinical Director **Review date: 26 July 2026** **Next review due: July 2028**

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This leaflet is based on current NHS, NICE and British Thoracic Society guidance on chronic cough in adults. It is general information and does not replace advice from a clinician who has assessed you. If your symptoms change or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.