

Drug Treatment of Cough

Yacoub M. Irshaid, MD, PhD, ABCP

Department of Pharmacology

Drug Treatment of Cough

- Cough is a protective reflex mechanism.
- It can be stimulated by irritation, inflammation or tumors of the respiratory tract

Types of cough:

1. Useful cough (productive): serves a purpose and **should not be suppressed.**
2. Useless cough (unproductive): is distressing and can exhaust the patient if severe, both physically and psychologically. **Should either be made useful or suppressed.**

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- Drugs that suppress cough are called **antitussives**.
- Antitussives suppress cough **without affecting the underlying cause**. Therefore, they are only symptomatic treatment.
- They should **not** be used for the cough of bronchial asthma or that caused by suppurative lesions of the respiratory tract.
- The best antitussive treatment is treatment of the underlying cause.

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Sites of Action of Antitussives:

- I. On the peripheral sites (afferent side of the cough reflex): reduction of input of stimuli from throat, larynx, trachea and bronchial tree by relieving irritation or producing a soothing effect.

Demulcents:

1. **Warm moist atmosphere (warm water vapor):** promotes secretion of dilute mucous that provide protective coating of the inflamed mucous membrane.
- Used for cough arising below the larynx.

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2. Lozenges, syrup or linctus of licorice or methylcellulose:

- Provides coating of mucous membranes for cough arising above the larynx.

Menthol or Eucalyptus vapor or lozenges:

- They reduce irritation and thus tendency for cough
- They have local anesthetic effect.
- Can be combined with warm water vapor

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- II. Measures acting on the efferent side of the cough reflex:
 - To render secretions more easily removable.
 - Reduce the amount of coughing by increasing its efficiency.

1. **Mucolytics:**

Are drugs which reduce viscosity of bronchial secretions, making them easily removable.

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Bromhexine

- Causes depolymerization of the mucopolysaccharide fibers of mucous so that large, less viscous amounts can be expectorated.

Acetylcysteine, Carbocysteine, Mecysteine

- Contain free sulfhydryl (-SH) groups, that can open disulfide bonds (-S-S-) of mucous, and thus, reducing its viscosity.

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- Best results are achieved by inhalation or nebulization.
- Can also be given orally.
- Can cause GI irritation and allergic reactions.
- Water vapor inhalation or hydrating a dehydrated patient also reduce viscosity of bronchial secretions.

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Dornase alfa

- It is a phosphorylated glycosylated recombinant human deoxyribonuclease.
- Given by inhalation or nebulization to patients with **cystic fibrosis**, where there is a genetic defect in Cl^- transport leading to viscous sputum.
- The blocked airways and sputum trap pathogens and inflammatory cells, which when lysed produce substantial amounts of free and very viscous DNA

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2. Expectorants:

- Agents which increase the amount of, and liquefy bronchial secretions.

Mentholated water vapor

Guaifenesin:

- It reduces adhesiveness and surface tension which facilitates removal of mucus and soothes dry, irritated membranes
- It is of questionable clinical value.
- Adverse effects: Nausea, vomiting, headache.

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Drugs that act on the CNS:

- Act by suppressing the medullary cough center.
- 1. Opioids and related drugs:
 - Lower doses are needed to suppress cough than those needed to produce analgesia.
 - Antitussive effect is not blocked by the opiate antagonist, Naloxone.

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Codeine (Methylmorphine):

- Antitussive dose 15 mg (analgesic dose is 60 mg)
- It has less addictive and less respiratory depression than other opiates.
- Part of the antitussive effect is due to sedation.

Adverse effects:

1. Inhibition of ciliary activity in bronchioles and dryness of secretions lead to reduced clearance of thick sputum and sputum retention.
2. Constipation.

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Dextromethorphan

- **Non-narcotic, non-analgesic, non-addictive, non-constipating and does NOT inhibit mucociliary clearance.**
- **Antitussive action is equal to codeine.**
- **Adverse effects are minor at therapeutic doses.**

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H₁-histamine Receptor Blockers (Diphenhydramine):

- Can suppress cough with substantial sedation.
- Can be used in children only at night.
- Usually, cough in children is almost always useful and should NOT be suppressed.