



Research Week 2021

Corticosteroids in the Management of Chronic Cough: A One-Year Retrospective Analysis

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Keywords

Chronic Cough, Steroids, OCS, ICS

Abstract

Background

Chronic cough in adults is the most common primary complaint when pursuing medical treatment in the United States. The management of these patients is complex due to their varying symptoms, cough durations, and previous treatments. We assess these patient-level characteristics as well as the responsiveness to corticosteroids as an initial diagnostic and therapeutic intervention for chronic cough.

Methods

Patients presenting with “chronic cough” from January-December 2018 at a tertiary laryngology clinic were retrospectively identified. Demographics, associated symptoms, as well as oral corticosteroid (OCS) and inhaled corticosteroid (ICS) cough improvement were recorded. Cough improvement was determined by patient subjective satisfaction, dissatisfaction, and percent reduction of coughing.

Results

A total of 37 patients who initiated OCS were included. Of those patients, 19 did not progress to ICS therapy, while 14 completed both OCS and ICS. Throughout the three groups, shortness of breath, rhinorrhea, and hoarseness were the most common presenting complaints. After the 37 patients completed 14-day OCS treatment, 30% (11) were >85% improved and satisfied, 19% (7) were <85% improved but satisfied, 3% (1) was <85% improved and unsatisfied, and 11% (4) noted no improvement in cough. Overall, 47% (18) demonstrated satisfactory steroid response. At 3-month follow-up 78% (14) of these steroid-responsive patients had continued steroid using ICS and 86% (12) remained satisfied with cough control.

Conclusions

Almost half of patients with a presenting complaint of chronic cough can be identified as steroid responsive with OCS and can be effectively treated with subsequent ICS.