Cough syrup for a tight chest

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Introduction

The feeling of having a tight chest may be caused by many different conditions, some of which are not chronic, while others can be relieved by OTC medication. This article will examine a tight chest associated with coughing due to non-chronic illness.

A tight chest

Having difficulty breathing and a tight chest is worrisome. Most people are aware that tightness in the chest may accompany conditions such as a heart attack. This same sensation could herald an asthma attack. However, chest tightness may also accompany a cold, flu and coughing. These patients may be treated with OTC medication, including cough syrup.

The coughing reflex is part of the body’s defence mechanism to prevent foreign substances, such as smoke and dust, from entering the lungs. Dust particles in the lungs may allow bacteria to grow and infection to develop. When a person coughs, there is an intake of air, the larynx closes, the abdominal and chest muscles contract, and air is driven out of the lungs as the larynx reopens. The air is exhaled at speed, clearing the airways of particles and excessive secretions.

“Having difficulty breathing and a tight chest is worrisome.”

Bronchospasm is the constriction of the muscles around the bronchi, leading to inhibited exhaling. This leads to the inefficient removal of mucus and increased infection potential. Bronchospasm tends to cause increased coughing. Continued coughing may result in fatigue and pain in the chest muscles. Patients sometimes complain of a tight chest or bronchospasm in conjunction with a dry or productive cough.

Coughing

Coughing may be caused by irritants, such as smoke; illnesses, such as bronchitis and pneumonia; and conditions, such as asthma, gastro-oesophageal reflux, chronic lung disease and infection.

A dry cough may also be known as a non-productive, “tickly” or irritating cough. This type of cough occurs with throat inflammation, when no phlegm or thick mucus is produced. The body registers the inflammation as being unusual, and attempts to remove it by coughing, potentially exacerbating the inflammation and worsening the cough.

A wet or chesty cough usually produces phlegm. This cough is useful as it helps to remove phlegm from the lungs and airways.

Cough medicine

Cough medicine contains different types of ingredients, with differing mechanisms of action. Examples are suppressants, expectorants, mucolytics, decongestants, antihistamines and bronchodilators.
“Patients with more than one health concern must be carefully evaluated before a cough medicine can be recommended.”

**Cough suppressants**

Cough suppressants are used to suppress the urge to cough. These are useful for a dry, non-productive cough. Examples of common cough suppressants are dextromethorphan, pholcodine and codeine phosphate.

**Expectorants**

Expectorants thin the mucus of a wet or productive cough, allowing it to be cleared more effectively. Guaphenesin and ammonium chloride are examples of expectorants.

**Mucolytics**

Mucolytics break down mucus and facilitate its removal. Bromhexine and carbocysteine are examples.

**Decongestants**

Decongestants are used to control mucus production, and reduce swelling of the mucus linings of the airways. Pseudoephedrine is used in some cold and flu syrups.

**Antihistamines**

Antihistamines are often added to medicine that contain decongestants to inhibit inflammation and to control mucus production, particularly when the condition is due to an allergy. Promethazine, diphenhydramine, doxylamine and triprolidine are examples of common antihistamines.

**Bronchodilators**

Bronchodilators are used to relax the muscles around the lower airways and to allow mucus clearance. These are useful when the patient experiences wheezing. Theophylline, etofylline, terbutaline and orciprenaline are examples of bronchodilators used in cough syrup.

When a patient complains of a tight chest and the type of cough has been identified, a product can be selected that may help to alleviate the symptoms.

**Caution**

Patients with more than one health concern must be carefully evaluated, and any other medication taken into consideration before a cough medicine can be recommended. Care must be taken to prevent the overdose of certain ingredients and/or interaction between certain medications.

**Conclusion**

There are many causes of coughing and chest tightness. It is important to determine the underlying causes of both the cough and bronchospasm before medication can be selected.

**Bibliography**