

Chronic Cough

Chronic cough is a cough that has lasted for at least 8 weeks. Chronic cough can come from smoking-related lung diseases (eg, chronic obstructive pulmonary disease (<https://www.radiologyinfo.org/en/info/copd>), emphysema, lung cancer (<https://www.radiologyinfo.org/en/info/lung-cancer>)), upper airway cough syndrome, asthma, gastroesophageal reflux disease, bronchitis, immunodeficiencies, or repeated exposure to inflammation in the body. Initial imaging is done to determine the cause of this persistent cough and provide the correct treatment.

For an individual with chronic cough and no known risk of lung cancer, chest x-ray (<https://www.radiologyinfo.org/en/info/chestrad>) is usually appropriate. CT of the chest (<https://www.radiologyinfo.org/en/info/chestct>) with or without intravenous (IV) contrast may be appropriate especially if the results of an initial chest x-ray are inconclusive. These same recommendations hold for individuals who have a chronic cough with an increased risk for lung cancer.

In individuals with a chronic cough that continues after the initial treatment, it is likely the initial clinical evaluation did not determine the right cause. In these cases, a chest x-ray or a chest CT scan with or without IV contrast is usually appropriate. In addition, a CT maxillofacial (CT of the face, head, sinus (<https://www.radiologyinfo.org/en/info/sinusct>)) without IV contrast may be appropriate if there is inflammation in the upper airways to better visualize the sinuses.

For more information, see *Chronic Obstructive Pulmonary Disease (COPD)* (<https://www.radiologyinfo.org/en/info/copd>).

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