



*"When you can't breathe...
nothing else matters"[®]*

Acute Bronchitis

What is acute bronchitis?

Acute bronchitis is a very common disease with symptoms relating to temporary inflammation of the airways of the lungs. It is caused by virus infections in over 95% of cases. A small minority of cases are caused by bacteria; however there is little evidence that antibiotics are effective in the treatment of the condition.

What symptoms will people have?

The major symptom of acute bronchitis is cough.

The cough may be associated with mucus (sputum) production, which may be clear to yellow or green in colour. Some people may have an audible noise on breathing which can be a whistle (wheeze) or a rattle. There may be other symptoms associated with the viral cause such as a runny nose, sore throat, muscle aches and pains, sore eyes or headache, particularly early in the illness. Chest pain is not a symptom usually associated with bronchitis.

Who gets acute bronchitis?

The condition affects adults and children. It is more common during winter months, especially during influenza outbreaks. Tobacco smoke and other air pollutants appear to worsen symptoms and may prolong the cough. Persons with a chronic lung disease may also get acute bronchitis, however different treatment may be required in this case.

When is a cough unlikely to be acute bronchitis?

Your doctor may suggest further tests if your symptoms or signs on examination indicate an alternative diagnosis. These include a persistent or recurrent fever, especially with shivering (rigors), the presence of significant pain on breathing, coughing of blood, significant breathlessness or a cough lasting longer than expected. Your doctor may also hear sounds on listening to your lungs that suggest an alternative illness. Recurrent episodes of cough may suggest asthma or chronic bronchitis. Prolonged coughing for some weeks may be due to 'whooping cough' (pertussis infection).

Tests for acute bronchitis

There are no specific tests for acute bronchitis. However, if your doctor is concerned that pneumonia may be present, they may organise a chest x-ray. Other tests may be performed if there is recurrent or prolonged cough. Sputum samples are not usually necessary unless another diagnosis is being considered.

Treatment of acute bronchitis

Antibiotics

Your doctor will NOT USUALLY prescribe antibiotics for acute viral bronchitis. Antibiotics have been conclusively shown to have minimal benefit in the treatment of acute bronchitis. Due to unwanted side-effects they may be harmful in a small number of people. They will usually only be prescribed where your doctor is concerned that there may be an additional bacterial infection complicating the bronchitis.

Cough suppressants

Cough suppressants do not shorten the illness of acute bronchitis, and in many people make little difference to the symptoms. In some people where cough is especially troubling they may be used, especially where there is sleep disturbance.

Bronchodilators

Bronchodilators are medications used to open up the airways (for example, Salbutamol™/Ventolin™). They are not usually helpful to reduce cough in people with acute bronchitis, but may reduce wheeze or chest tightness in some patients.

Smoking Cessation

Smoking cessation is likely to reduce persistence of symptoms. An episode of acute bronchitis is a good opportunity to review your need to stop smoking and to consider strategies with your doctor for succeeding in this key preventative activity.

What if I get recurrent symptoms?

Acute bronchitis does not cause permanent damage to the lung, so most recurrences are due to a new viral infection. Occasionally recurring symptoms may be due to undiagnosed asthma or chronic bronchitis. Your doctor will test for these diseases if they seem likely.

September 2014

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