

Medications That Can Battle Bronchitis

There are basically two kinds of bronchitis, acute and chronic bronchitis. These two may have the same last names but they vary from their causative effects and treatment prescribed to control the diseases.

Acute bronchitis is a short-term illness that becomes rampant during the cold seasons. It is usually followed by a viral infection and can go together with a bacterial infection. Acute bronchitis is self-limiting which clears itself within fourteen days but the cough may continue. Like any other upper respiratory tract infections, having acute bronchitis can raise chance of developing pneumonia.

People who are at risk of getting acute bronchitis are infants, very young children, and the old adults. This is due to the fact that infants and very young children still have underdeveloped immune systems, while the old adults, on the other hand, have immune systems that have become weaker due to ageing. Other group populations who are at risk are smokers and those with preexisting lung and/or heart ailments. People who are often exposed to pollution are also at risk of being afflicted with acute bronchitis.

Chronic bronchitis is also an inflammation of the respiratory tract with an accompaniment of phlegm expectoration and coughing. But in chronic bronchitis, the signs and symptoms are at hand for no less than 3 months for two successive years.

Chronic bronchitis may be caused by the inhalation of respiratory airway irritants. Airway irritants may be in the form of cigarette smoking or pollution or a combination of both. Because this disease advances gradually, middle aged individuals and the elderly are expected to be diagnosed with this malady.

The main objective for the treatment of both acute and chronic bronchitis is to alleviate the symptoms.

For acute bronchitis, treatment consists of lots of intake of fluids, quitting smoking, taking a break, humidifying the home environment, and medications (in case of fever and pain). Acetaminophen is the most prescribed medication to fight pain and fever. Another is aspirin, but this is contraindicated for children and pregnant women due to the fact that this drug is suspected to be the cause of Reye's syndrome among children. For women, it may cause severe

bleeding.

Anti-cough medicines are taken when the sufferer experiences dry cough (cough without phlegm). But if the individual is experiencing cough with phlegm, then it should be left as it is and let the phlegm come out naturally. This is because if cough is suppressed and the phlegm is contained within, then it will eventually accumulate in the air passages which will cause an obstruction and may become a hotbed for dangerous microorganisms.

Expectorants, on the other hand, are medications that help liquidify or thin out the thick mucus in the lungs to make it easier to cough out.

Moreover, if the physician has detected a bacterial infection then an antibiotic medication may be prescribed. Intake of antibiotic medications should be done religiously as the physician ordered because any lapse may only cause the return of the disease or worse, the bacteria may produce a strain that could become immune to the medication.

Antibiotic medications may include the following:

- ? azithromycin
- ? trimethoprim or sulfamethazole
- ? clarithromycin
- ? tetracycline or ampicillin
- ? amoxicillin (for children below eight years of age due to the fact that tetracycline causes discoloration on the teeth that have not come out)

As for chronic bronchitis, treatment is a bit more multifaceted than acute bronchitis. The physician would need to carefully evaluate the patient for other health problems before a treatment plan can be employed to control the disease. Including in the treatment plan are changes in lifestyle that will involve stoppage of smoking and keeping away from polluted environments. Regular exercise may also help in the control of the disease.

Medications for chronic bronchitis include anti-inflammatory medications and bronchodilators. Anti-inflammatory drugs decrease the inflammation in the respiratory tract tissues.

The following are commonly prescribed anti-inflammatory drugs:

- ? Corticosteroids (i.e. prednisone, can be taken either as an oral medication or through IV)
- ? Ipratropium (also reduces the amount of mucus produced)

Meanwhile, bronchodilators help loosen up the bronchial muscles which then

permits increase air flow in the respiratory passages. These can be taken in orally or by inhalation through a nebulizer (an apparatus that transport medication to the respiratory tract). Bronchodilators may include the following:

- ? metaproterenol
- ? albuterol

With the advancement of chronic bronchitis, the individual afflicted may eventually require supplemental oxygen. And in the later stages of the disease, the patient may need to be in the hospital if he or she developed severe complications.

In addition to conventional medications, herbal medicines can be also included in the treatment plan. Herbal medicines may be inhaled (like eucalyptus) or taken as tea made from mullein or *Verbascum thapsus*, coltsfoot or *Tussilago farfara*, and anise seed or *Pimpinella anisum*.

There are numerous medications out there and it is best to consult the physician to know which drug can best help treat and/or control bronchitis.