

LSUHS Podcast: Lasting Cough: What Can You Do?

Audio	Video
Mark Klein What do you think is the most common reason that an adult might visit a primary care provider? Odds are, if you're watching this or listening to this, you might be living with it right now—chronic cough. Yes, it's incredibly common, but it can also be incredibly debilitating. And you shouldn't have to live like that all the time. So on today's episode of the LSU Health Shreveport Podcast, we're clearing our throats and clearing the air—talking about chronic cough: how long is too long, and what can you do about it? Today's guest is an Associate Professor of Otolaryngology at LSU Health Shreveport. She's also the Director of the Ark-La-Tex Voice, Airway, and Swallowing Center. Making her LSU Health Shreveport podcast debut—Dr. Karuna Dewan.	Mark and Karuna Dewan, MD, FACS, Interview in a Television Studio
Karuna Dewan: Well, thank you so much for having me. Mark Klein: Glad to have you here for sure, and excited to talk about this topic. When I read that line that it's the most common reason someone might visit a primary care provider—one, it just seems incredibly obvious, but you don't think about it. Chronic cough is everywhere. Karuna Dewan: Absolutely. And interestingly, since COVID—since 2020—we're seeing more and more of it. Chronic cough is a cough that's been around for three months or longer. Usually it's a dry cough, but oftentimes it started as a productive cough—you had an illness associated with it, and all those other symptoms got better, but you're still coughing. I think the reason people go to the physician for it so often is because it can be pervasive and bothersome. Especially now, when we're more aware of who around us is sick, it's hard to go to the grocery store, the movies, or a performance if you're coughing all the time. So people seek medical care for it.	

Mark Klein:

So when is it time to seek medical care? When is it too long?

Karuna Dewan:

We start to worry at three months—that’s absolutely too long. But I encourage people to go sooner.

If all your other cold symptoms have resolved and it’s been at least two weeks, it’s time to get checked out. Start with your primary care doctor. If your cough has been around for two and a half to three months, then it’s time to see an ear, nose, and throat doctor.

Mark Klein:

How many times have you heard someone say, “I’ve just been dealing with this forever”?

Karuna Dewan:

Too many times. If the cough has been there longer than you can remember, it’s definitely time to see a doctor.

Mark Klein:

What do you want someone in that situation to hear?

Karuna Dewan:

It’s important to evaluate your vocal cords and figure out where the cough is coming from.

Cough can come from many parts of the body—lungs, heart, sinuses, nose, throat, or even something called neurogenic cough, which often follows a viral illness.

That’s why it’s important to see a healthcare professional—to narrow down the cause and determine why it’s lingering.

Mark Klein:

Let’s talk about how different specialties work together to figure that out.

Karuna Dewan:

I’m fortunate to work in a multidisciplinary cough clinic. Patients with complex cases come in once a month and are seen by myself, a speech therapist, and an allergy specialist together.

Before seeing me, patients usually have seen their primary care doctor and may have had tests like a chest X-ray or treatments for reflux. Allergy treatment is also common in this region.

By the time they reach ENT, we evaluate the vocal cords and make sure everything—from heart to lungs to GI tract—is functioning properly. We also consider smoking and vaping, which can contribute to chronic cough.

Mark Klein:

A lot of people assume it's "just allergies." Is that accurate?

Karuna Dewan:

Very common assumption—even among my own friends and family. But if you've been coughing for two to three months and over-the-counter treatments aren't helping, it's time for evaluation.

Mark Klein:

What happens next if those treatments don't work?

Karuna Dewan:

Cough is often multifactorial. You might have reflux, allergies, and a neurogenic component all at once.

If initial treatments fail, we may use imaging like a CT scan of the sinuses to look for infection or fluid.

Mark Klein:

Not all coughs are the same. Can you explain the difference?

Karuna Dewan:

We ask patients what triggers their cough—lying down, eating, cold air, etc.

A productive cough may suggest lung or gastrointestinal issues, while a dry cough points elsewhere. Sometimes sinus drainage can also lead to coughing up phlegm.

Mark Klein:

Let's talk about the impact on the voice.

Karuna Dewan:

Chronic coughing can cause hoarseness. Even frequent throat clearing counts.

When you cough, your vocal cords slam together forcefully. Over time, that repeated strain can cause injury.

Coughing has a purpose—but too much can be harmful.

Mark Klein:

What would you say to someone who feels like there's no end in sight?

Karuna Dewan:

Nobody should have to live with a chronic cough.

We can treat about 70% of cases by identifying the cause. The rest may involve cough suppression therapy with a speech-language pathologist, especially when coughing becomes habitual.

Mark Klein:

What does that therapy look like?

Karuna Dewan:

It involves retraining your response. When you feel the urge to cough, you substitute other actions—like sipping water, deep breathing, or chewing gum.

Mark Klein:

You have a unique background in broadcasting—how did that lead you here?

Karuna Dewan:

I have an undergraduate degree in radio broadcasting and always loved voices.

When I realized I could combine that interest with medicine, I knew I'd found my path. I now focus on airway, voice, and swallowing—things directly tied to quality of life.

Mark Klein:

That connection to quality of life really stands out.

Karuna Dewan:

Absolutely. Eating, speaking, and breathing are all essential to social interaction and overall well-being. That's why I'm passionate about this work.

Mark Klein:

If there's one takeaway, what should listeners remember?

Karuna Dewan:

Chronic cough is treatable—and you don't have to live with it. It may take time to determine the cause, but we can help. Start with your primary care doctor and move forward from there.

Mark Klein:

What research are you excited about?

Karuna Dewan:

There's growing research into neurogenic cough—especially post-viral nerve issues.

Audio	Video
We're exploring how to help those sensory nerves heal faster, which could reduce long-lasting cough symptoms. Mark Klein: How should someone get referred to a specialist? Karuna Dewan: Start with your primary care doctor. After initial tests and treatments, they can refer you to an ENT specialist for further evaluation. Mark Klein: Anything else you'd like to add? Karuna Dewan: No, thank you so much for having me. This is one of my favorite topics.	
Mark Klein: We're glad you joined us. If you're interested in being on the LSU Health Shreveport Podcast, email SHVcommunications@lsuhs.edu. And if you're dealing with a chronic cough, we hope you get it cleared up soon. We'll see you next time.	LSUHS Podcast animation.