



Mr Kenneth Park,
Upper Gastro-Intestinal Surgeon



Stuart FitzSimons,
Medical Herbalist



Dr Tim Robinson,
GP



Dr Emma Mardlin,
Clinician in Mind Body Medicine



Dr Sarah Brewer,
Medical Nutritionist



I've had a persistent cough for 6 months now and it doesn't seem to be getting any better. I went to my GP who diagnosed me with asthma and gave me an inhaler but it hasn't made any difference and I struggle to hold a conversation without needing to cough. I don't smoke or have any other symptoms but it is really getting me down. What else could be the problem?

Mr Kenneth Park says: It's possible that your cough is caused by chronic Gastroesophageal Reflux Disease (GERD). It tends to be more prominent throughout the day and isn't necessarily triggered by other lifestyle habits. GERD is a chronic, often progressive condition resulting from a weak Lower Oesophageal Sphincter. This muscle at the junction of the oesophagus and stomach acts as a natural barrier to stomach contents refluxing up into the oesophagus and upper airways. Like a valve, it allows food and liquid to pass through to the stomach and then closes immediately after swallowing. However, in people with GERD, the sphincter is weak, allowing acid and bile to reflux back up from the stomach. When left untreated, serious complications can result. Eating smaller meals, avoiding spicy food, chocolate, coffee and alcohol can help, remaining upright after meals and eating a few hours before going to bed. In chronic cases patients may be put on a course of tablets called Proton Pump Inhibitors (PPIs), which are effective in treating some symptoms of GERD but PPIs only reduce the acid in the fluid that refluxes out of the stomach and do not stop reflux happening. In cases where surgery is recommended, traditional surgery involves wrapping a portion of the stomach around the oesophagus to reinforce the weakened sphincter. However, a newer procedure using the LINX Management System involves a less invasive operation which does not require any anatomic alteration of the stomach. Recent published studies indicate it is safer than traditional surgery with a quicker recovery period and fewer side

effects. LINX comprises of a small flexible band of interlinked titanium magnetic beads intended to help the sphincter resist opening to gastric pressures and preventing reflux. Food and drink can pass normally into the stomach but the magnetic attraction of the device is designed to close the lower oesophageal sphincter immediately after swallowing.
Mr Kenneth Park is an Upper Gastro-Intestinal Surgeon and Clinical Director of the Aberdeen Clinic
www.theaberdeenclinic.com.

Stuart FitzSimons says: It's important to get your doctor to check your throat and examine it thoroughly before proceeding. It is not uncommon for inhalers, such as Ventolin, to cause dryness and irritation of the throat, again, chat to your doctor about that. There are many simple herbal remedies that could be useful for reducing this irritation. Liquorice is a very effective herb, as a liquid extract that can be sipped slowly or as a solid extract that can be sucked slowly. Liquorice is also used for the treatment of asthma. However, do not take it if you are taking oral steroids such as prednisolone. Another soothing herb and one that will coat the throat is marshmallow. Again a liquid extract is best as it can be sipped slowly. Thyme may be useful in this case as the essential oil it contains helps to relax the airways in asthma and helps to fight any bugs that may be lurking in the airways and throat. Finally, gargling with sage tea is probably the oldest known way to reduce inflammation, irritation and infections in the throat. Make a cup of tea with a little dried sage and gargle 3 or 4 mouthfuls or add 40 drop of sage tincture to a little warm water for the gargle.
Stuart FitzSimons, MNIMH is involved in all aspects of herbal medicine including private practice, teaching, product development and promotion.
www.plantasmagorical.com

Dr Tim Robinson says: There are two possible explanations for your persistent cough. Firstly your treatment for asthma may be insufficient or incorrect. If you have been prescribed the 'reliever inhaler' called Ventolin, your technique may not be satisfactory in getting the medicine down into your lungs or perhaps you need the 'preventer inhaler' Becotide or Qvar instead. The second explanation for your persistent cough is that you may be suffering from stomach acid coming up the gullet, irritating the larynx and triggering off a dry cough. This usually occurs in association with a hiatus hernia in which the valve at the top of the stomach is leaky. Your GP may prescribe a trial of an acid neutralising medicine to see if it eliminates the cough. Having said the above, there is a 'golden rule' with respect long term cough especially if it has not responded to treatment. I think it is entirely reasonable to ask your GP for an x-ray of your chest. If the above measures have not been effective it is probably sensible to be referred to a chest specialist for further investigations and guidance.

Dr Tim Robinson MB BS MRCGP DRCOG MFHom is an NHS and private GP who practices homeopathy, nutritional medicine and acupuncture in Dorset.
www.doctorTWRobinson.com

Dr Emma Mardlin says: Often until we address the core 'meta' physical root cause of any health concerns, as well as the physical remedies, healing can be prolonged or entirely resistant. So if you consider addressing beyond the physical in this case, you can really begin resolving the problem. Looking at your symptoms meta physically - the intangible thought/emotional patterns that manifest physically as certain health concerns; persistent coughs (with all else ruled out) are often indicative of having some sort of irritation you really need to get off your chest, and be seen and

heard. Generally speaking, assuming an accurate diagnosis, asthma can be indicative of an inability to breathe for oneself, feeling stifled, or suppressed crying in some way. Perhaps seeking a smoother love in some area of your life. Coughs and asthma can also be exacerbated by certain allergies too, in which case metaphysically speaking, who or what may you REALLY be allergic too? Therefore, analyse carefully what might resonate for you personally here, and how you can best resolve this to positively address the core root cause, and subsequently your physical complaints. Either way in the case of any irritations and potential allergies, adopting a vegan diet has been proven to significantly help alleviate such, so this too is perhaps worth considering.
Dr Emma Mardlin PhD (CMH), MABH, BSc, DPsyc is a Clinical and Medical Therapist in Mind and Body Health at The Pinnacle Practice, contact@thepinnaclepractice.co.uk

Dr Sarah Brewer says: Symptoms resulting from GERD usually come on within 30 minutes of eating a meal, and may be precipitated by taking exercise, bending or lying down. Meals containing fat, pastry, chocolate, peppermint, acidic fruit juices, coffee or alcohol most frequently trigger attacks and it is worth avoiding these if GERD is diagnosed. Symptoms are worsened by smoking, so if you do smoke, ask about referral to a local anti-smoking clinic. Being overweight also exacerbates the problem - you may benefit from following a higher protein, lower carb diet which helps you feel full more quickly so you tend to eat less - as well as reducing the tendency towards reflux this help with weight loss, too.
Dr Sarah Brewer is a medical nutritionist. Read her Nutritional Medicine blog at www.DrSarahBrewer.com and follow her nutritional tweets @DrSarahB

Do you need expert advice? Send your problem, in confidence, to: ask@yourwellness.com. Problems can only be answered on the page, we are unable to answer personally. You can also visit the forums at www.yourwellness.com and ask advice from other readers online.