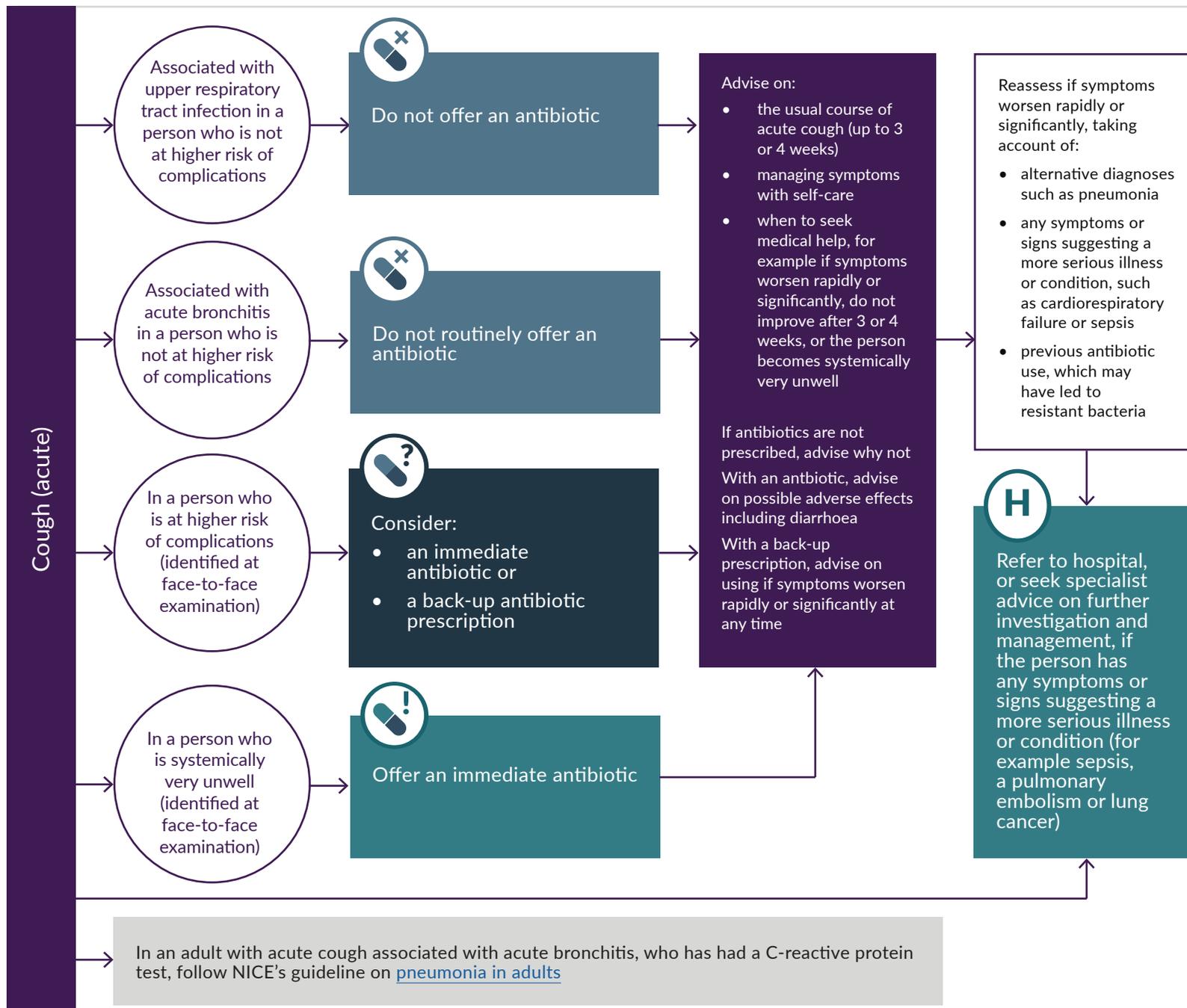


Cough (acute): antimicrobial prescribing



i Self-care

Be aware that limited evidence suggests that the following have some benefit in relieving cough symptoms:

- honey (in people over 1 year)
- pelargonium (herbal remedy)
- cough medicines containing the expectorant guaifenesin (in people over 12 years)
- cough medicines containing the antitussive dextromethorphan (in people over 12 years and if the cough is not persistent, such as in asthma, or accompanied by excessive secretions)

P Background

- Acute coughs are usually self-limiting but can last up to 3 to 4 weeks
- Usually caused by a viral upper respiratory tract infection, such as a cold or flu
- Also caused by acute bronchitis, which is usually viral but can be bacterial
- Antibiotics make little difference to how long a cough lasts

People at higher risk of complications:

- have a pre-existing comorbidity
- are young children who were born prematurely
- are older than 65 years with 2 or more of the following, or older than 80 years with 1 or more of the following:
 - hospitalisation in previous year
 - type 1 or type 2 diabetes
 - history of congestive heart failure
 - current use of oral corticosteroids

Cough (acute): antimicrobial prescribing

Choice of antibiotic: adults aged 18 years and over

Antibiotic ¹	Dosage and course length ²
First choice	
Doxycycline ³	200 mg on first day, then 100 mg once a day for 4 days (5-day course in total)
Alternative first choices ⁴	
Amoxicillin	500 mg three times a day for 5 days
Clarithromycin	500 mg twice a day for 5 days
Erythromycin (in pregnancy)	250 mg to 500 mg four times a day or 500 mg to 1000 mg twice a day for 5 days
¹ See BNF for appropriate use and dosing in specific populations, for example, hepatic impairment, renal impairment, pregnancy and breast-feeding ² Doses given are by mouth using immediate-release medicines, unless otherwise stated ³ Doxycycline should not be given to pregnant women (BNF June 2018) ⁴ Amoxicillin or erythromycin are preferred in women who are pregnant	

Choice of antibiotic: children and young people under 18 years

Antibiotic ¹	Dosage and course length ²
First choice	
Amoxicillin	1 to 11 months: 125 mg three times a day for 5 days 1 to 4 years: 250 mg three times a day for 5 days 5 to 17 years: 500 mg three times a day for 5 days
Alternative first choices ³	
Clarithromycin	1 month to 11 years: Under 8 kg, 7.5 mg/kg twice a day for 5 days 8 to 11 kg, 62.5 mg twice a day for 5 days 12 to 19 kg, 125 mg twice a day for 5 days 20 to 29 kg, 187.5 mg twice a day for 5 days 30 to 40 kg, 250 mg twice a day for 5 days 12 to 17 years: 250 mg twice a day or 500 mg twice a day for 5 days
Erythromycin	1 month to 1 year: 125 mg four times a day or 250 mg twice a day for 5 days 2 to 7 years: 250 mg four times a day or 500 mg twice a day for 5 days 8 to 17 years: 250 mg to 500 mg four times a day or 500 mg to 1000 mg twice a day for 5 days
Doxycycline ⁴	12 to 17 years: 200 mg on first day, then 100 mg once a day for 4 days (5-day course in total)
¹ See BNF for children for appropriate use and dosing in specific populations, for example, hepatic impairment and renal impairment ² The age bands apply to children of average size and, in practice, the prescriber will use the age bands in conjunction with other factors such as the severity of the condition and the child's size in relation to the average size of children of the same age. Doses given are by mouth using immediate-release medicines, unless otherwise stated ³ Amoxicillin or erythromycin are preferred in young women who are pregnant ⁴ Doxycycline is contraindicated in children under 12 years and should not be given to young women who are pregnant (BNF June 2018)	

When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.