

What doctors want patients to know about bronchitis

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Bronchitis is a respiratory condition that affects millions of people every year, often bringing with it a persistent cough, chest discomfort and fatigue. The illness occurs when the lining of the bronchial tubes—which carry air to and from the lungs—becomes inflamed, usually as a result of a viral infection, but sometimes due to bacteria or irritants such as smoke and air pollution.

While acute bronchitis typically resolves within a few weeks, chronic bronchitis can last much longer and may signal a more serious underlying health issue. Recognizing the symptoms, understanding the causes, and knowing when to seek medical help are all important steps in managing and preventing bronchitis.

The AMA's What Doctors Want Patients to Know™ series gives physicians a platform to share what they want patients to understand about today's health care headlines and how to take charge of their health through preventive care.

In this installment, [Jonathan Stoeve, MD](#), a pulmonologist with Confluence Health in Wenatchee, Washington, discusses bronchitis and what patients should know.

[Confluence Health](#) is part of the [AMA Health System Member Program](#), which provides enterprise solutions to equip leadership, physicians and care teams with resources to help drive the future of medicine.

The airways are inflamed

Bronchitis is an inflammation of the bronchial tubes, which are the airways that carry air to and from the lungs.



Jonathan Stoevers, MD

“Acute bronchitis is usually defined as a self-limited lower respiratory tract infection lasting no more than three weeks,” said Dr. Stoevers, “with symptoms including a cough with or without phlegm, with no other alternative explanation based on clinical or radiographic information.”

“There are other forms of bronchitis including chronic bronchitis, nonasthmatic eosinophilic bronchitis and asthmatic bronchitis to name a few,” he said. “Chronic bronchitis is a long-term airway inflammation with a persistent, productive cough that lasts for at least three months per year for two consecutive years.

“This can be caused by a variety of conditions including smoking-related lung disease, vaping, cannabis use, asthma and other diseases,” said Dr. Stoevers.

It is not a cold or pneumonia

“[Pneumonia](#) is infection or inflammation of the alveoli all the way in the deep part of the lung,” said Dr. Stoevers, noting it “is not just limited to the bronchi and airways.

“Respiratory viruses including the [common cold](#) are frequent causes for bronchitis, but the common cold does not always cause bronchitis,” he added.

Bronchitis can occur at any time

“Acute bronchitis is incredibly common with up to 5% of the population affected each year leading to around 10 ambulatory visits per 1,000 people,” said Dr. Stoever, noting it “is most common during the respiratory viral season, since viral respiratory infections are the primary cause for acute bronchitis.”

“The timing and peak of respiratory viral season can vary year over year but usually peaks during the holidays and starts declining around early spring,” he said. “Acute bronchitis can also be seen during pollen season and with exposure to particulate air pollution such as wildfire smoke.”

Bronchitis symptoms start with congestion

“Usually, the symptoms start in the upper respiratory tract with nasal congestion or stuffiness, a runny nose, snot dripping down the back of your throat, and occasionally fever and malaise,” said Dr. Stoever, which refers to a feeling of discomfort, illness or lack of well-being.

“Then the symptoms progress to include the lower respiratory tract causing a cough with or without phlegm but limited to the larger and medium sized airway tubes in bronchitis,” he said, noting that “bronchitis symptoms typically last for one to three weeks.”

A cough is your primary defense

“[Cough](#) and mucus are your body’s primary defense against pneumonia,” said Dr. Stoever. “A cough, even with purulent phlegm, does not necessarily mean bacterial infection.”

“If you have symptoms of a viral infection, prepare to stick it out for a week or two or three with chicken soup, a good show or book, guaifenesin or dextromethorphan to help with the cough, nasal irrigation with hypertonic saline,” he said, “along with some hot and humid showers where you cough up some nasty phlegm and make noises like your grandpa did when he would hock up a big loogie.”

“Some people hate coughing up all that junk when you have bronchitis, but I would encourage you to reframe the nasty reputation of phlegm as your part in the fight against the virus that is trying to take over your airways,” Dr. Stoever said.

Symptoms of bacterial or viral bronchitis are similar

“The symptoms of bacterial and viral bronchitis can be very similar. Since viral bronchitis is much more common of a cause—about 90% of cases—usually bronchitis is assumed to be from a virus,” Dr. Stoever said. “Even if it is a bacterial bronchitis, your body may be able to clear the infection without the need for antibiotics using our immune system.

“White blood cells, antibodies, and mucus itself are all components of how our body fights off respiratory infections,” he added. “Mucociliary clearance—aka coughing up phlegm—is a primary early defense and is a sign that your body is doing a good job!”

“If you have shortness of breath, fevers of a temperature of greater than 100.4, or a fast heart rate, you may want to seek care since those symptoms would be more concerning for pneumonia from bacteria,” Dr. Stoever explained. “This is especially important if your symptoms suddenly worsen around one to two weeks into the infection instead of improving.”

Chronic bronchitis can be problematic

“Acute bronchitis very rarely becomes a problem without antibiotics,” said Dr. Stoever, “but recurrent episodes of bronchitis can be a symptom of underlying asthma or another lung diseases.”

“If there is a true bacterial infection such as bacterial pneumonia or other resurgent vaccine preventable diseases like [whooping cough](#), it can lead to chronic airway changes and a persistent cough,” he said. “And in rare cases, permanent lung damage.”

Bronchitis can be contagious at first

“Bronchitis can be contagious for the first several days of symptoms,” said Dr. Stoever.

“Since it is normally caused by viruses, including SARS-CoV2, influenza, RSV and others, they can be passed to others either by inhaling droplets coughed into the air by someone who is sick, or by touching a

contaminated surface and then touching your mouth.

“Using a face mask when you first start to have symptoms can help prevent passing it on to loved ones, along with hand hygiene and cough hygiene,” he added.

Over the counter bronchitis treatments aren’t proven

The best treatment for bronchitis is “rest, hydration and a nice warm, steamy shower to help cough up any sticky mucus that accumulated during sleep,” said Dr. Stoever. “Nasal saline rinses—using a premade salt packet and distilled water—can help flush out the nose and help with the ‘ick’ feeling from congestion.”

Nasal saline rinses “may also shorten the days with symptoms but there is conflicting evidence if there is benefit,” he added, noting that, “unfortunately, many over the counter treatments for bronchitis, such as cough medicines and mucolytics, have very limited data available in general with most small trials showing no benefit compared to placebo.”

Let your body heal

For acute bronchitis, “the most effective treatment is a tincture of time and letting your body take care of itself,” said Dr. Stoever, noting that “bacterial infections account for 10% or less of acute bronchitis cases.”

“Home remedy care can include honey, warm tea, humidifiers, cough drops, expectorants—which are medications that help loosen mucus in the respiratory tract—and hypertonic saline nasal rinses,” he said. “Hypertonic saline nasal rinses have been shown to reduce the time of cold symptoms by several days.”

Think twice about antibiotics

“Antibiotics are rarely necessary for bronchitis,” said Dr. Stoever. “There is an old saying that if you take an antibiotic for your bronchitis, you’ll feel better in seven days, but if you don’t take an antibiotic, you’ll feel better in a week.”

“Overuse of antibiotics leading to side effects and antibiotic resistance, overprescription of bronchodilators and inhaled steroids, antihistamines, oral steroids, and nasal steroids can lead to significant risk to patients and cost to the health care system without any clear evidence of benefit,” he said.

With bronchitis fatigue, take it slow

If you are experiencing bronchitis fatigue, “you should listen to your body and take it slow,” Dr. Stoever said. “Jumping right back into the gym after recovering may not be the best idea if your body is still trying to recover.”

Instead, “slowly reintroduce exercise starting with more of a focus on aerobic or endurance exercise until you feel back to normal,” he said.

Bronchitis treatment for children is similar to adults

For treatment of children with bronchitis, it is “similar treatment as adults—focusing on hydration and rest—but if you use over the counter medication, make sure it is specifically made for kids, and the dose is appropriate according to the label on the medication,” said Dr. Stoever, emphasizing that “baby aspirin is NOT for babies.”

“If your child is having difficulty coughing the phlegm out, you can do gentle slaps on their back to help knock the mucus free,” he suggested. “You can see videos online outlining how to do this correctly if you search for chest physiotherapy. Watching a video is important to make sure you don’t accidentally hurt your child.”

Take steps to prevent the spread

Bronchitis itself is not contagious, but the viruses and bacteria that cause it are, especially “in the early phase of the illness,” said Dr. Stoever. “Precautions include hand hygiene, wearing a mask to protect you from droplets and avoiding touching your face.”

“You should also avoid contact with people showing active signs of a respiratory illness and be very vigilant if you have a close household contact who is sick,” he said.

Stay up to date on vaccines

The best way to prevent a cold from turning into bronchitis “is by not getting sick with a virus in the first place,” said Dr. Stoever, noting that “using a mask during viral season and practicing good hand hygiene are very important to interrupt transmission.”

“Getting your vaccines is also very helpful and can significantly reduce your chance of getting so sick you end up in the hospital,” he said. “[Staying up to date on vaccines](#) for respiratory illnesses including pneumococcal pneumonia, [RSV](#), [influenza](#) and COVID-19 is very important.”

Avoiding touching your mouth is another excellent way “to reduce your risk of developing bronchitis,” Dr. Stoever said, noting that “no supplements, including zinc, vitamin D, vitamin C or other natural remedies, have been shown to prevent or reduce acute respiratory tract infections.”

The immune system fights off bronchitis

“Your immune system works 24/7 in protecting you from infections and fighting them off for you,” said Dr. Stoever, noting that bronchitis “never goes away on its own, your immune system kills off and clears the infection and then your body cleans up the mess from the battle afterwards.”

“It usually does not require treatment to get better, unless you have a chronic lung disease or a weak immune system,” he said.

Seek medical attention

If you have bronchitis symptoms, said Dr. Stoevers, it is important to seek medical attention if you “have a fast heart rate of more than 100 beats per minute at rest, fast breathing rate of over 24 breaths per minute and a fever of 100.4 °F or higher.”

“If your cough does not improve or lingers for more than six to eight weeks after initial symptoms, you should seek medical attention,” he said.