



# Patient education: Chronic bronchitis (The Basics)

Written by the doctors and editors at UpToDate

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## What is chronic bronchitis?

Bronchitis is irritation in the bronchi, the tubes that carry air in and out of the lungs ( [figure 1](#)). It causes a cough that brings up mucus (phlegm). In people with chronic bronchitis, this cough lasts for 3 months or longer for 2 or more years in a row.

Chronic bronchitis is 1 of the 2 main types of a serious lung disease called chronic obstructive pulmonary disease ("COPD"). The other main type is called "emphysema." COPD can make it hard to breathe. Both types are usually caused by smoking.

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## What causes chronic bronchitis?

The most common cause is smoking, which can irritate and scar the bronchi. People can also get it from breathing in toxic fumes or gases.

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## What are the symptoms of chronic bronchitis?

The symptoms include:

- Coughing up mucus on most days for at least 3 months, for 2 years in a row
  - Feeling very tired
  - Feeling short of breath
  - Chest discomfort or tightness
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## Will I need tests?

Yes. Your doctor might do several tests, including:

- Chest X-ray – This can show other conditions that might be causing your cough, such as pneumonia.

- Spirometry – You take a deep breath and then blow out as fast and hard as you can into a machine. The machine measures how much air you can blow out of your lungs and how fast.

If the results of your spirometry are **not** normal, you will inhale medicine to open your airways and then do the test again. This will help the doctor or nurse find out if your problem is caused by chronic bronchitis or another lung problem, such as asthma. People with asthma usually have normal results after they use an inhaler. People with chronic bronchitis usually do not.

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## How is chronic bronchitis treated?

There are 3 main types of treatment:

- Medicines – There are many prescription medicines to treat chronic bronchitis. Most people use inhalers that help open up their airways or reduce swelling in their airways. Often, people need more than 1 inhaler at a time. Sometimes, people need a medicine called [prednisone](#) that comes as pills when their symptoms get worse than normal.
- Oxygen – If the disease gets worse, some people need to use oxygen for breathing.
- Pulmonary rehabilitation ("rehab") – People learn things they can do to improve their symptoms. They learn exercises and ways to breathe that can help ease symptoms.

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## What can I do on my own?

To take care of yourself, you can:

- Avoid smoking – Quitting smoking is the most important thing you can do for your health. This is true no matter how long you have smoked or how much you smoke. If you are having trouble quitting, your doctor or nurse can help.
- Avoid triggers – If things like fumes, pollution, or dust make your breathing worse, try to avoid them.
- Lower your risk of infection – Certain infections can be very hard on your lungs and can cause COPD symptoms to flare up. You can lower your risk by getting certain vaccines. These include vaccines to protect against the flu, pneumonia, and COVID-19. Also, wash your hands often and stay away from people who are sick.
- Make healthy lifestyle changes – Eating a healthy diet can help improve your health. You can also improve your health by following your pulmonary rehab plan if you have

one, or finding other ways to move your body.

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## When should I call the doctor?

**Call for an ambulance** (in the US and Canada, **call 9-1-1**) if you:

- Have trouble breathing, even when resting
- Are coughing up blood
- Have signs of a heart attack, such as:
  - Severe chest pain, pressure, or discomfort with:
    - Trouble breathing, sweating, upset stomach, or cold clammy skin
    - Pain in your arms, back, or jaw
    - Worse pain with activity like walking up stairs
  - Fast or irregular heartbeat
  - Feeling dizzy, faint, or weak

Call your regular doctor for advice if you:

- Have a fever of 100.4°F (38°C) or higher, or chills
  - Feel weak or more short of breath than usual when doing your normal activities
  - Have new or worsening cough, wheezing, sputum, or shortness of breath
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## More on this topic

[Patient education: Chronic obstructive pulmonary disease \(COPD\) \(The Basics\)](#)

[Patient education: Medicines for COPD \(The Basics\)](#)

[Patient education: COPD exacerbation \(The Basics\)](#)

[Patient education: Spirometry \(The Basics\)](#)

[Patient education: Asthma in adults \(The Basics\)](#)

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[Patient education: Quitting smoking for adults \(The Basics\)](#)

[Patient education: How to use your dry powder inhaler \(adults\) \(The Basics\)](#)

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[Patient education: Chronic obstructive pulmonary disease \(COPD\) \(Beyond the Basics\)](#)

[Patient education: Chronic obstructive pulmonary disease \(COPD\) treatments \(Beyond the Basics\)](#)

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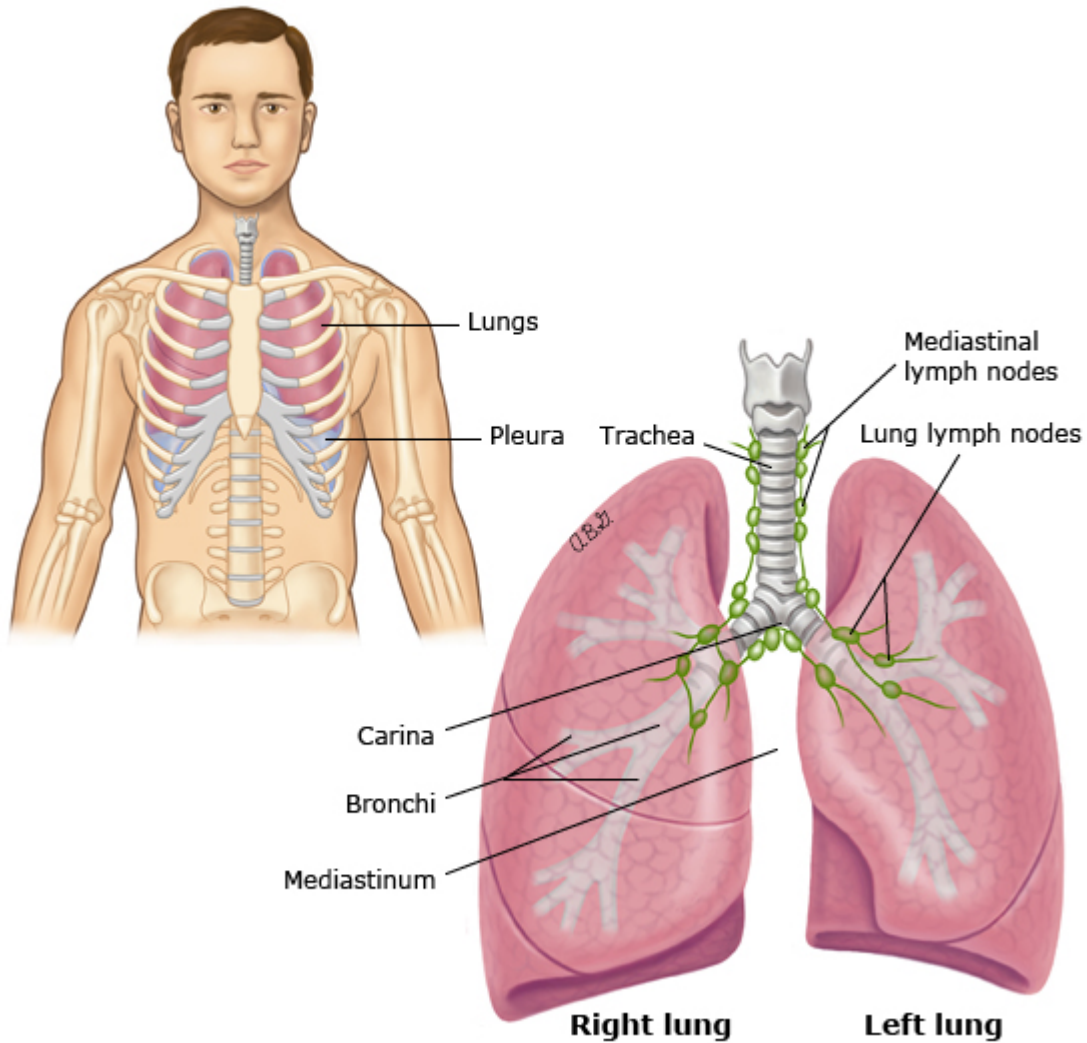
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**This topic retrieved from UpToDate on:** Jan 03, 2025.

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Topic 17195 Version 11.0

**GRAPHICS****Normal lung anatomy**

The lungs sit in the chest, inside the ribcage. They are covered with a thin membrane called the "pleura." The windpipe, or "trachea," branches into 2 smaller airways called the left and right "bronchi." The space between the lungs is called the "mediastinum." Lymph nodes are located within and around the lungs and mediastinum.

Graphic 67527 Version 15.0

