PREFACE

Preface

Mangesh Tiwaskar^{1*}, Agam Vora²



This special issue of our journal "Journal of the Association of Physicians of India" is dedicated to exploring the multifaceted nature of cough, a common yet complex symptom with significant implications for public health. The articles featured in this issue provide a comprehensive examination of cough in various populations and its epidemiology, highlighting the challenges and complexities associated with its management, particularly in the context of acute respiratory conditions, evolving treatment patterns, and the long-term impact of the COVID-19 pandemic.

Cough, a protective reflex associated with respiratory conditions, affects 5-10% of the Indian population.¹⁻³ Though cough is one of the most common symptoms patients have, its reported prevalence is very low in India. Acute cough, which lasts between 3 and 8 weeks, is often self-limiting but contributes to 50% of hospitalizations, highlighting its substantial burden on healthcare.4 The first study in this issue explores the prevalence of cough in Indian adults and the elderly, focusing on its association with respiratory tract infections (RTIs), asthma, and other conditions. The study underscores the importance of categorizing cough as productive, nonproductive, or unspecified for more targeted management, especially in different age groups.

Building on this epidemiological data, another study investigated cough treatment practices in India. Cough is typically

managed symptomatically with fixed-dose combinations (FDCs) and antibiotics.⁵ However, the study raises concerns about the widespread use of irrational formulations and antibiotics, which can contribute to antibiotic resistance. This article calls for standardized guidelines to ensure rational prescribing practices, promoting more effective and appropriate treatments for acute cough. Similar concerns are highlighted earlier in the Association of Physicians of India recommendations as well.⁶

Furthermore, the long-term impact of the COVID-19 pandemic on cough prevalence and types was studied. The research reveals that during and after the pandemic, there was an increase in nonproductive and unspecified coughs, reflecting the lasting respiratory consequences of COVID-19. This highlights the need for ongoing surveillance and tailored interventions to manage cough in the postpandemic era.

The publications included in this issue focus on the prevalence, treatment patterns, and post-COVID-19 effects of cough. They provide critical data for internal medicine physicians. Together, they emphasize the importance of more nuanced and evidence-based management strategies. The findings advocate for rational prescribing practices, particularly in reducing the overuse of antibiotics, and call for better documentation and tailored treatment approaches. This issue ultimately aims to enhance clinical

outcomes by addressing the complexities of cough management and adapting treatment strategies to the evolving healthcare landscape.

REFERENCES

- De Blasio F, Virchow JC, Polverino M, et al. Cough management: a practical approach. Cough 2011;7(1):7.
- 2. Morice AH, Mcgarvey L, Pavord I, et al. Recommendations for the management of cough in adults. Thorax 2006;61(1):1–24.
- 3. Annesi I, Kauffmann F. Is respiratory mucus hypersecretion really an innocent disorder? A 22-year mortality survey of 1,061 working men. Am Rev Respir Dis 1986;134(4):688–693.
- Jindal SK. Caring for respiratory disease in India in the COVID-19 era. Expert Rev Respir Med 2021;15(8): 959–961.
- Sema FD, Asres ED, Wubeshet BD. Evaluation of rational use of medicine using WHO/INRUD core drug use indicators at Teda and Azezo Health Centers, Gondar Town, northwest Ethiopia. Integr Pharm Res Pract 2021;10:51–63.
- Vora A, Pal J, Jindal S, et al. Association of Physicians of India: National Expert Opinion and Clinical Practice Recommendations for Primary Care Cough Management in India. J Assoc Physicians India 2024;72(10):77–82.

¹Consultant Physician and Diabetologist, Shilpa Medical Research Centre; ²Consultant Pulmonologist and Medical Director, Vora Clinic, Mumbai, Maharashtra, India; *Corresponding Author

How to cite this article: Tiwaskar M, Vora A. Preface. J Assoc Physicians India 2025;73(6):6–6.