



Asthma mimickers: Evaluating and treating wheezing/coughing adults

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Diagnosis and Initial Assessment

OTHER CAUSES OF CHRONIC COUGH

INTRATHORACIC

- Asthma
- Lung Cancer
- Tuberculosis
- Bronchiectasis
- Left Heart Failure
- Interstitial Lung Disease
- Cystic Fibrosis
- Idiopathic Cough

EXTRATHORACIC

- Chronic Allergic Rhinitis
- Post Nasal Drip Syndrome (PNDS)
- Upper Airway Cough Syndrome (UACS)
- Gastroesophageal Reflux
- Medication (e.g. ACE Inhibitors)

TABLE 2.2

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C/o chronic cough

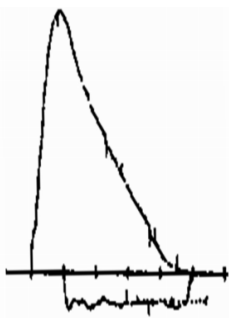
ASTHMA MIMICKER	KEY TO DIFFERENTIATION
COPD	CXR, ABGs, adventitious breath sounds
Pertussis	Severe cough with gagging/emetesis
CF	Sweat test
GERD	pH probe
Chronic bronchitis	Sputum production
Tracheomalacia	Choking "blue spells" - Bronchoscopy
Primary ciliary dyskinesia	Mucus/infection lungs, nose, ears

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C/o wheezing

ASTHMA MIMICKER	KEY TO DIFFERENTIATION
Stridor	Symptoms on inhalation
VCD	Sx on inh, blunted inspiratory limb
CHF	EKG, Echo, CXR, rales, edema
Central airway obstruction	Helium, bronchoscopy
Bronchiectasis	High res CT

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VCD

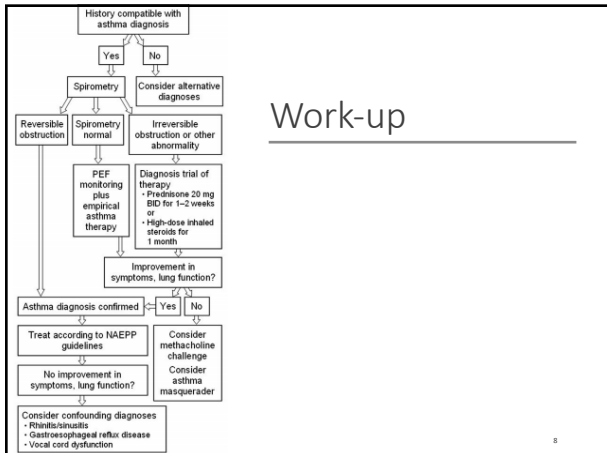
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Uncommon mimickers

- PIE Pulmonary infiltration with eosinophilia
- TPE Tropical eosinophilia
- Löffler syndrome
- CEP Chronic eosinophilic pneumonia
- IHE Idiopathic hypereosinophilic syndrome
- ABPA Allergic bronchopulmonary aspergillosis
- CSS Churg-Strauss syndrome
- Metastatic carcinoid syndromw
- Systemic mastocytosis
- Lymphangioleiomyomatosi

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Work-up



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