**Is hypnotherapy an acceptable treatment option for children with habit cough?**

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**Abstract**

Habit cough is a non-organic cough which occurs more commonly in children. It can have a significant impact on the quality of life of the child and their family. One possible treatment option for habit cough is hypnotherapy. At our centre we offered hypnotherapy sessions to patients diagnosed with habit cough, and conducted telephone interviews with patients’ parents to determine the acceptability of this therapy. Nine patients’ parents were interviewed, and despite being unsure of what to expect with hypnotherapy, all nine found it an acceptable treatment option. We also found that hypnotherapy resulted in cough reduction or cessation in 6 out of 9 cases.

[105 words]

**Background**

Cough is a common cause of morbidity in childhood and can have a significant impact on the quality of life of a child and their family.1 One type of non-organic cough is ‘habit cough’, which can vary from being repetitive and dry to being explosive, loud and honking, and may sometimes be labelled as psychogenic cough. Habit cough occurs frequently during the day, particularly in the presence of parents or teachers, but invariably ceases during sleep.2 The habit cough is often preceded by an upper respiratory tract infection, after which the child continues to cough habitually despite the infection having cleared. Associations with psychological conditions and stressful life events such as death of a family member or moving schools have also been described as triggers.2 Habit cough can also be a vocal tic in children with a complex motor tic disorder.

Studies in North America have reported the successful use of suggestion therapy in treating children with habit cough.3 Hypnotherapy is used to teach children how to change their thought processes in relation to a specific behaviour or habit. It is particularly successful when it involves multi-sensory images and engages their imagination.5 It has successfully been used in the treatment of functional abdominal pain and irritable bowel syndrome in paediatric patients.4,5

No studies outside of North America have investigated the use or acceptability of hypnotherapy as a treatment option for habit cough. At our centre, we have one play specialist trained in hypnotherapy who offers 30 minute sessions to paediatric patients with functional abdominal pain or habit cough. There is a need for a randomised controlled trial (RCT) to assess the role of hypnotherapy in children with habit cough. It will only be possible to recruit adequate children to this RCT if parents view it as an acceptable treatment option. The aim of our study was therefore to assess the acceptability to parents of using hypnotherapy as a treatment option for children with habit cough.

**Methods**

Since January 2015, children aged 5 to 17 years at our centre with a doctor diagnosis of habit cough have been referred for hypnotherapy. Each child had between 1 and 3 hypnotherapy sessions lasting approximately 30 minutes. The session were run by our trained play specialist and took place in a mulit-sensory room, with relaxing music and different light settings. She would individualise the sessions by asking the child to think of their favourite place or favourite hobby and come up with a relevant scenario in which they would be encouraged to leave or ‘throw away’ their cough. The child would repeatedly be told that ‘you do not need the cough’ and ‘you do not want the cough’.

We subsequently conducted telephone interviews with parents of children who underwent hypnotherapy between January 2015 and September 2016. These semi-structured interviews were undertaken by one clinician. The interviews were recorded and transcribed. The transcriptions were then analysed to identify common themes.

The UK NHS Health Research Authority ethics tool confirmed that ethical approval was not required (<http://www.hra.nhs.uk/resources/before-you-apply/is-nhs-rec-review-required/>) as this was a service evaluation.

**Results**

Nine children had hypnotherapy between the inclusion dates. Cough was the only symptom in 7 patients, 1 patient also had a diagnosis of more complex motor tic disorder and 1 patient had severe anxiety.

Interviews were undertaken with all nine parents. The habit cough had been present for between four months and three years. All nine parents stated that they found hypnotherapy an acceptable and appropriate treatment option. Four were pleasantly surprised after initially being sceptical (comments in Table 1). Most parents were unsure what to expect and commented that they were pleased it had worked and would like to have further sessions or similar alternatives in future.

After hypnotherapy, parents reported a significant reduction in cough in 6/9 (67%) children. This included complete cough cessation in (4/9) 44%. The parents of 5 children (56%) stated that after hypnotherapy, cough was no longer affecting their child’s or the family’s quality of life, even despite the absence of complete cough cessation. The patient with anxiety had a reduction in cough frequency but the patient with complex motor tic disorder did not appear to have much benefit from hypnotherapy. No adverse effects were reported by parents following hypnotherapy sessions.

**Discussion**

Habit cough can be extremely debilitating. It frequently affects school performance and has a negative effect on the quality of life of the child and their family.1,2 Despite it being a well-recognised condition, there is no treatment consensus which is frustrating for parents and clinicians. This lack of clear guidance is influence by a paucity of good quality data. This is the first study outside North America to examine the use of hypnotherapy for the treatment of habit cough. Although limited by the small sample size and single centre, we have shown that parents see hypnotherapy as an acceptable treatment option for habit cough. Furthermore, it seems to be effective in reducing cough and the associated morbidity, especially in children who do not have a complex motor tic disorder. There is an urgent need for a randomised controlled trial (RCT) to assess the effectiveness of hypnotherapy in habit cough. We hope that by demonstrating that hypnotherapy is acceptable to parents as a treatment option for habit cough, this RCT can be planned and undertaken.

[887 words]

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**Conflicts of interest**

No conflicts of interest to declare

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