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Title: The prevalence of gastroesophageal reflux disease in chronic unexplained cough

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Body: Background: The common co-existence of cough and gastroesophageal reflux disease (GERD) is well established. Several respiratory guidelines for the management of chronic unexplained cough in adults advocate empirical treatment of GERD. In contrast, guidelines from some gastroenterological societies conclude that cough is unlikely to be related to GERD in the absence of heartburn or acid regurgitation. This study was performed to assess the prevalence of GERD in adults with chronic unknown cough. Methods: Adult patients with unexplained cough more than 8 weeks were prospectively enrolled from January 2007 to December 2011 and underwent 24-hour impedance-pH monitoring of esophagus. Results: The prevalence of GERD in chronic unexplained cough, as evidenced by an abnormal impedance or pH profile, was 46.3% (68 of 147 patients). Among 49 patients who were given anti-reflux medication for at least 3 months, 39 patients (79.6%) achieved total or near-total elimination of cough. Conclusion: GERD, which is readily detected by 24-hour impedance-pH monitoring, is a common cause of chronic unexplained cough and can be successfully managed with anti-reflux therapy.