#### BEHAVIORAL COUGH SUPPRESSION THERAPY

BEHAVIORAL COUGH SUPPRESSION THERAPY IS AN EFFECTIVE TREATMENT APPROACH DESIGNED TO ADDRESS CHRONIC COUGHS THAT DO NOT RESPOND WELL TO TRADITIONAL MEDICAL INTERVENTIONS. THIS THERAPY FOCUSES ON MODIFYING THE BEHAVIORAL PATTERNS ASSOCIATED WITH COUGHING, HELPING PATIENTS GAIN CONTROL OVER THEIR COUGH REFLEX THROUGH SPECIALIZED TECHNIQUES. CHRONIC COUGH CAN SIGNIFICANTLY IMPAIR QUALITY OF LIFE, LEADING TO SOCIAL EMBARRASSMENT, PHYSICAL DISCOMFORT, AND PSYCHOLOGICAL DISTRESS. BEHAVIORAL COUGH SUPPRESSION THERAPY OFFERS A NON-PHARMACOLOGICAL SOLUTION THAT TARGETS THE UNDERLYING HABIT AND NEUROLOGICAL TRIGGERS OF PERSISTENT COUGHING. THIS ARTICLE EXPLORES THE PRINCIPLES, METHODS, AND CLINICAL APPLICATIONS OF BEHAVIORAL COUGH SUPPRESSION THERAPY, PROVIDING A DETAILED UNDERSTANDING OF ITS BENEFITS AND IMPLEMENTATION. THE DISCUSSION FURTHER INCLUDES PATIENT ELIGIBILITY, THERAPY OUTCOMES, AND INTEGRATION WITH OTHER TREATMENT MODALITIES TO MANAGE CHRONIC COUGH EFFECTIVELY. BELOW IS AN OUTLINE OF THE MAIN TOPICS COVERED IN THIS COMPREHENSIVE REVIEW.

- UNDERSTANDING BEHAVIORAL COUGH SUPPRESSION THERAPY
- MECHANISMS AND TECHNIQUES USED IN THERAPY
- CLINICAL APPLICATIONS AND PATIENT SELECTION
- EFFECTIVENESS AND OUTCOMES OF THERAPY
- INTEGRATION WITH OTHER TREATMENT APPROACHES

## UNDERSTANDING BEHAVIORAL COUGH SUPPRESSION THERAPY

BEHAVIORAL COUGH SUPPRESSION THERAPY IS A SPECIALIZED INTERVENTION AIMED AT REDUCING OR ELIMINATING CHRONIC COUGH BY TARGETING BEHAVIORAL AND NEUROLOGICAL COMPONENTS OF THE COUGH REFLEX. UNLIKE MEDICAL TREATMENTS THAT ADDRESS PHYSIOLOGICAL CAUSES SUCH AS INFECTIONS OR INFLAMMATION, THIS THERAPY FOCUSES ON RETRAINING THE BRAIN AND BODY TO SUPPRESS THE URGE TO COUGH. IT IS PARTICULARLY BENEFICIAL FOR PATIENTS WITH REFRACTORY OR IDIOPATHIC CHRONIC COUGH, WHERE NO CLEAR MEDICAL ETIOLOGY IS IDENTIFIED. THE THERAPY INVOLVES PATIENT EDUCATION, AWARENESS TRAINING, AND THE IMPLEMENTATION OF SPECIFIC SUPPRESSION STRATEGIES TO CONTROL COUGHING EPISODES.

#### DEFINITION AND SCOPE

BEHAVIORAL COUGH SUPPRESSION THERAPY ENCOMPASSES A SET OF COGNITIVE AND PHYSICAL TECHNIQUES DESIGNED TO HELP INDIVIDUALS RECOGNIZE AND INHIBIT THEIR COUGH REFLEX. THE SCOPE OF THIS THERAPY USUALLY INCLUDES PATIENTS SUFFERING FROM CHRONIC COUGH LASTING MORE THAN EIGHT WEEKS, WHICH DOES NOT IMPROVE WITH STANDARD MEDICAL TREATMENT. IT ALSO ADDRESSES COUGH HYPERSENSITIVITY SYNDROME, A CONDITION CHARACTERIZED BY AN EXAGGERATED COUGH RESPONSE TO OTHERWISE INNOCUOUS STIMULI.

#### HISTORICAL CONTEXT AND DEVELOPMENT

The development of behavioral cough suppression therapy dates back to research on habit cough and psychogenic cough in the late 20th century. Early studies demonstrated that patients could learn to control coughing through techniques involving distraction and controlled breathing. Over time, the therapy has evolved to include evidence-based protocols that combine behavioral modification with respiratory therapy principles, making it a recognized treatment option within pulmonology and speech pathology fields.

# MECHANISMS AND TECHNIQUES USED IN THERAPY

THE CORE MECHANISM BEHIND BEHAVIORAL COUGH SUPPRESSION THERAPY INVOLVES INTERRUPTING THE COUGH REFLEX PATHWAY BY EMPLOYING CONSCIOUS CONTROL AND SENSORY MODULATION. THE THERAPY HELPS PATIENTS IDENTIFY THE PREMONITORY SENSATIONS OR TRIGGERS THAT PRECEDE COUGHING AND APPLY SUPPRESSION TECHNIQUES TO REDUCE COUGH FREQUENCY AND SEVERITY.

#### AWARENESS AND IDENTIFICATION OF TRIGGERS

A CRITICAL INITIAL STEP IN THERAPY IS HELPING PATIENTS BECOME AWARE OF THEIR COUGH TRIGGERS, SUCH AS THROAT IRRITATION, ENVIRONMENTAL IRRITANTS, OR STRESS. THIS AWARENESS ENABLES TARGETED INTERVENTION AND PREVENTS AUTOMATIC COUGHING RESPONSES. PATIENTS ARE TAUGHT TO RECOGNIZE EARLY SENSATIONS AND DIFFERENTIATE BETWEEN THE URGE TO COUGH AND ACTUAL COUGHING BEHAVIOR.

## SUPPRESSION TECHNIQUES

SEVERAL BEHAVIORAL TECHNIQUES ARE UTILIZED IN THERAPY TO SUPPRESS COUGH, INCLUDING:

- CONTROLLED BREATHING: SLOW, DIAPHRAGMATIC BREATHING TO REDUCE AIRWAY IRRITATION AND NERVOUS SYSTEM AROUSAL.
- SWALLOWING: USING DELIBERATE SWALLOWING TO OVERRIDE THE COUGH REFLEX.
- DISTRACTION: ENGAGING ATTENTION AWAY FROM THE URGE TO COUGH THROUGH MENTAL OR PHYSICAL ACTIVITIES.
- Relaxation Exercises: Techniques such as progressive muscle relaxation to decrease general tension that
  may exacerbate coughing.
- Vocal Hygiene: Strategies to minimize throat irritation and maintain mucosal health.

#### ROLE OF SPEECH-LANGUAGE PATHOLOGISTS

Speech-language pathologists often play a central role in delivering behavioral cough suppression therapy. Their expertise in respiratory control, voice therapy, and behavioral modification equips them to tailor interventions to individual patient needs. Therapy sessions typically involve guided practice, feedback, and reinforcement of suppression techniques.

## CLINICAL APPLICATIONS AND PATIENT SELECTION

Behavioral cough suppression therapy is primarily applied in patients with chronic refractory cough, where traditional medical treatments have failed. Proper patient selection is essential to optimize therapy outcomes and involves thorough assessment by healthcare professionals.

#### INDICATIONS FOR THERAPY

PATIENTS CONSIDERED FOR BEHAVIORAL COUGH SUPPRESSION THERAPY GENERALLY INCLUDE THOSE WITH:

- CHRONIC COUGH LASTING LONGER THAN EIGHT WEEKS WITHOUT IDENTIFIABLE ORGANIC CAUSE.
- COUGH HYPERSENSITIVITY SYNDROME.
- HABIT COUGH OR PSYCHOGENIC COUGH.
- Persistent cough following respiratory infections.
- PATIENTS CONTRAINDICATED FOR OR UNWILLING TO USE PHARMACOLOGICAL TREATMENTS.

#### ASSESSMENT AND DIAGNOSTIC EVALUATION

PRIOR TO INITIATING THERAPY, A COMPREHENSIVE EVALUATION IS CONDUCTED TO RULE OUT UNDERLYING MEDICAL CONDITIONS SUCH AS ASTHMA, GASTROESOPHAGEAL REFLUX DISEASE, OR CHRONIC BRONCHITIS. THIS ASSESSMENT OFTEN INCLUDES CLINICAL HISTORY, PHYSICAL EXAMINATION, PULMONARY FUNCTION TESTS, AND SOMETIMES IMAGING STUDIES. COLLABORATION BETWEEN PULMONOLOGISTS, OTOLARYNGOLOGISTS, AND SPEECH-LANGUAGE PATHOLOGISTS ENSURES ACCURATE DIAGNOSIS AND APPROPRIATE THERAPY PLANNING.

#### CONTRAINDICATIONS AND CONSIDERATIONS

BEHAVIORAL COUGH SUPPRESSION THERAPY MAY NOT BE SUITABLE FOR PATIENTS WITH COUGHS CAUSED BY SERIOUS MEDICAL CONDITIONS REQUIRING URGENT TREATMENT. ADDITIONALLY, COGNITIVE IMPAIRMENTS OR PSYCHIATRIC DISORDERS MAY LIMIT THE ABILITY TO ENGAGE EFFECTIVELY IN BEHAVIORAL THERAPY. IN SUCH CASES, MULTIDISCIPLINARY MANAGEMENT IS RECOMMENDED.

## EFFECTIVENESS AND OUTCOMES OF THERAPY

Multiple clinical studies have demonstrated the efficacy of behavioral cough suppression therapy in reducing cough frequency, severity, and associated quality of life impairments. The therapy offers a sustainable, drugfree option that addresses both the physical and psychological components of chronic cough.

#### CLINICAL EVIDENCE AND RESEARCH FINDINGS

RESEARCH SHOWS THAT PATIENTS UNDERGOING BEHAVIORAL COUGH SUPPRESSION THERAPY EXPERIENCE SIGNIFICANT IMPROVEMENT IN COUGH SCORES AND REDUCTION IN COUGH-RELATED ANXIETY AND SOCIAL AVOIDANCE. CONTROLLED TRIALS INDICATE THAT THERAPY CAN DECREASE COUGH FREQUENCY BY UP TO 70% IN SOME CASES. THE BENEFITS ARE OFTEN MAINTAINED LONG-TERM WITH CONTINUED PRACTICE OF SUPPRESSION TECHNIQUES.

#### PATIENT-REPORTED OUTCOMES

PATIENTS COMMONLY REPORT ENHANCED ABILITY TO CONTROL COUGHING EPISODES, REDUCED THROAT DISCOMFORT, AND IMPROVED PARTICIPATION IN SOCIAL AND PROFESSIONAL ACTIVITIES. EMOTIONAL WELL-BEING ALSO TENDS TO IMPROVE AS PATIENTS REGAIN CONFIDENCE AND REDUCE COUGH-RELATED DISTRESS.

#### CHALLENGES AND LIMITATIONS

DESPITE ITS BENEFITS, BEHAVIORAL COUGH SUPPRESSION THERAPY REQUIRES PATIENT MOTIVATION AND ADHERENCE, WHICH CAN BE CHALLENGING FOR SOME INDIVIDUALS. THE THERAPY MAY ALSO REQUIRE MULTIPLE SESSIONS AND ONGOING REINFORCEMENT FOR OPTIMAL RESULTS. ADDITIONALLY, VARIABILITY IN THERAPIST EXPERTISE AND PROTOCOL STANDARDIZATION CAN INFLUENCE OUTCOMES.

## INTEGRATION WITH OTHER TREATMENT APPROACHES

Behavioral cough suppression therapy is often integrated with other management strategies to provide comprehensive care for chronic cough patients. Combining behavioral interventions with medical and environmental treatments enhances overall efficacy.

#### PHARMACOLOGICAL TREATMENTS

In some cases, behavioral therapy is used alongside medications such as neuromodulators, antihistamines, or proton pump inhibitors to address coexisting conditions contributing to cough. This multimodal approach allows for symptom control from multiple angles.

#### ENVIRONMENTAL AND LIFESTYLE MODIFICATIONS

ELIMINATING OR REDUCING EXPOSURE TO COUGH TRIGGERS LIKE ALLERGENS, IRRITANTS, AND TOBACCO SMOKE COMPLEMENTS BEHAVIORAL THERAPY EFFORTS. PATIENTS ARE ENCOURAGED TO MAINTAIN VOCAL HYGIENE, HYDRATE ADEQUATELY, AND AVOID THROAT CLEARING OR EXCESSIVE SPEAKING TO MINIMIZE IRRITATION.

#### MULTIDISCIPLINARY CARE

EFFECTIVE MANAGEMENT OF CHRONIC COUGH OFTEN INVOLVES A TEAM OF SPECIALISTS, INCLUDING PULMONOLOGISTS, OTOLARYNGOLOGISTS, ALLERGISTS, AND SPEECH-LANGUAGE PATHOLOGISTS. BEHAVIORAL COUGH SUPPRESSION THERAPY REPRESENTS A KEY COMPONENT WITHIN THIS MULTIDISCIPLINARY FRAMEWORK, ENSURING PERSONALIZED AND HOLISTIC PATIENT CARE.

# FREQUENTLY ASKED QUESTIONS

#### WHAT IS BEHAVIORAL COUGH SUPPRESSION THERAPY?

BEHAVIORAL COUGH SUPPRESSION THERAPY (BCST) IS A NON-PHARMACOLOGICAL TREATMENT APPROACH DESIGNED TO HELP INDIVIDUALS CONTROL AND REDUCE CHRONIC COUGH BY TEACHING THEM TECHNIQUES TO SUPPRESS THE URGE TO COUGH.

#### WHO CAN BENEFIT FROM BEHAVIORAL COUGH SUPPRESSION THERAPY?

INDIVIDUALS SUFFERING FROM CHRONIC COUGH THAT IS REFRACTORY TO MEDICAL TREATMENT, INCLUDING THOSE WITH CONDITIONS LIKE UNEXPLAINED CHRONIC COUGH, UPPER AIRWAY COUGH SYNDROME, OR COUGH HYPERSENSITIVITY, MAY BENEFIT FROM BEHAVIORAL COUGH SUPPRESSION THERAPY.

#### HOW DOES BEHAVIORAL COUGH SUPPRESSION THERAPY WORK?

BCST Works by educating patients about cough triggers, teaching strategies to manage the cough reflex, and using techniques such as controlled breathing, swallowing, and distraction to suppress the cough and reduce its frequency.

# IS BEHAVIORAL COUGH SUPPRESSION THERAPY EFFECTIVE FOR CHILDREN WITH CHRONIC COUGH?

YES, BEHAVIORAL COUGH SUPPRESSION THERAPY HAS BEEN SHOWN TO BE EFFECTIVE IN CHILDREN WITH CHRONIC COUGH, HELPING THEM REDUCE COUGH FREQUENCY AND IMPROVE QUALITY OF LIFE WITHOUT RELYING ON MEDICATION.

# WHAT ARE THE COMMON TECHNIQUES USED IN BEHAVIORAL COUGH SUPPRESSION THERAPY?

COMMON TECHNIQUES INCLUDE CONTROLLED BREATHING EXERCISES, MINDFULNESS AND RELAXATION METHODS, SWALLOWING TECHNIQUES, AND IDENTIFYING AND AVOIDING COUGH TRIGGERS TO HELP MANAGE AND SUPPRESS THE COUGH REFLEX.

# ARE THERE ANY RISKS OR SIDE EFFECTS ASSOCIATED WITH BEHAVIORAL COUGH SUPPRESSION THERAPY?

BEHAVIORAL COUGH SUPPRESSION THERAPY IS GENERALLY SAFE WITH MINIMAL RISKS. HOWEVER, IMPROPER TECHNIQUE OR INADEQUATE GUIDANCE MAY LEAD TO FRUSTRATION OR INEFFECTIVE SYMPTOM CONTROL, SO IT IS IMPORTANT TO UNDERGO THERAPY WITH A TRAINED HEALTHCARE PROFESSIONAL.

### ADDITIONAL RESOURCES

1. BEHAVIORAL COUGH SUPPRESSION THERAPY: PRINCIPLES AND PRACTICE

This book provides a comprehensive overview of the theoretical foundations and clinical applications of behavioral cough suppression therapy (BCST). It covers assessment techniques, therapy protocols, and case studies illustrating successful treatment outcomes. Designed for speech-language pathologists and clinicians, it emphasizes evidence-based strategies to help patients manage chronic cough effectively.

#### 2. Managing Chronic Cough Through Behavioral Interventions

FOCUSING ON NON-PHARMACOLOGICAL APPROACHES, THIS BOOK EXPLORES VARIOUS BEHAVIORAL INTERVENTIONS FOR CHRONIC COUGH, WITH A SPECIAL EMPHASIS ON COUGH SUPPRESSION THERAPY. IT DISCUSSES PATIENT EDUCATION, HABIT REVERSAL, AND COUNSELING TECHNIQUES TO REDUCE COUGH FREQUENCY AND SEVERITY. THE TEXT INTEGRATES MULTIDISCIPLINARY PERSPECTIVES, INCLUDING PULMONOLOGY AND SPEECH THERAPY, TO OFFER A HOLISTIC TREATMENT APPROACH.

#### 3. THE COUGH REFLEX AND ITS BEHAVIORAL MODULATION

THIS TITLE DELVES INTO THE NEUROPHYSIOLOGICAL MECHANISMS UNDERLYING THE COUGH REFLEX AND HOW BEHAVIORAL TECHNIQUES CAN MODULATE THIS RESPONSE. IT PRESENTS CURRENT RESEARCH FINDINGS AND EXPLAINS HOW BCST CAN ALTER COUGH SENSITIVITY AND CONTROL. DEAL FOR RESEARCHERS AND CLINICIANS, THE BOOK BRIDGES THE GAP BETWEEN BASIC

#### 4. CLINICAL GUIDE TO HABIT COUGH AND BEHAVIORAL THERAPY

TARGETING HABIT COUGH, THIS GUIDE PROVIDES STEP-BY-STEP INSTRUCTIONS FOR IMPLEMENTING BEHAVIORAL COUGH SUPPRESSION THERAPY. IT INCLUDES ASSESSMENT TOOLS, THERAPY SESSION PLANS, AND TIPS FOR ENGAGING PATIENTS, PARTICULARLY CHILDREN AND ADOLESCENTS. THE BOOK ALSO ADDRESSES COMMON CHALLENGES AND TROUBLESHOOTING STRATEGIES TO ENHANCE THERAPY EFFECTIVENESS.

#### 5. CHRONIC COUGH IN CHILDREN: BEHAVIORAL THERAPY APPROACHES

THIS SPECIALIZED VOLUME FOCUSES ON PEDIATRIC CHRONIC COUGH AND THE ROLE OF BEHAVIORAL THERAPY IN ITS MANAGEMENT. IT HIGHLIGHTS DEVELOPMENTAL CONSIDERATIONS, COMMUNICATION STRATEGIES, AND FAMILY INVOLVEMENT IN THERAPY. CASE EXAMPLES ILLUSTRATE HOW BCST CAN IMPROVE QUALITY OF LIFE FOR YOUNG PATIENTS SUFFERING FROM PERSISTENT COUGH.

#### 6. INTEGRATIVE APPROACHES TO COUGH MANAGEMENT

Combining behavioral, medical, and environmental strategies, this book offers a multidisciplinary approach to managing chronic cough. It presents behavioral cough suppression therapy as a key component alongside pharmacological treatments. The text is geared towards healthcare providers seeking to optimize patient outcomes through integrative care.

#### 7. BEHAVIORAL TECHNIQUES FOR RESPIRATORY SYMPTOM CONTROL

This resource covers a range of behavioral techniques aimed at controlling respiratory symptoms, including cough, breathlessness, and throat clearing. It emphasizes the role of cough suppression therapy within a broader symptom management framework. Practical exercises, patient handouts, and therapist guidelines make it a useful tool for clinicians.

#### 8. THE ART AND SCIENCE OF COUGH SUPPRESSION THERAPY

EXPLORING BOTH THE SCIENTIFIC EVIDENCE AND THE THERAPEUTIC RELATIONSHIP, THIS BOOK ADDRESSES THE NUANCES OF DELIVERING EFFECTIVE COUGH SUPPRESSION THERAPY. IT DISCUSSES MOTIVATIONAL INTERVIEWING, PATIENT ADHERENCE, AND CUSTOMIZING INTERVENTIONS TO INDIVIDUAL NEEDS. THE BOOK IS VALUABLE FOR THERAPISTS SEEKING TO REFINE THEIR CLINICAL SKILLS AND IMPROVE PATIENT ENGAGEMENT.

#### 9. EVIDENCE-BASED BEHAVIORAL TREATMENTS FOR CHRONIC COUGH

THIS BOOK SYNTHESIZES CURRENT RESEARCH ON BEHAVIORAL TREATMENTS FOR CHRONIC COUGH, WITH A FOCUS ON EFFICACY AND CLINICAL OUTCOMES. IT REVIEWS RANDOMIZED CONTROLLED TRIALS, META-ANALYSES, AND PRACTICE GUIDELINES RELATED TO BCST. THE TEXT SERVES AS A REFERENCE FOR CLINICIANS COMMITTED TO APPLYING EVIDENCE-BASED PRACTICES IN COUGH MANAGEMENT.

# **Behavioral Cough Suppression Therapy**

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Lauren Timmons Sund, 2025-08-06 The sixth edition of Voice Therapy: Clinical Case Studies continues to offer a comprehensive approach to voice therapy, focusing on management strategies derived from real-world clinical cases. Authored by leading voice clinicians, the cases now feature an updated format that integrates comprehensive voice evaluations, detailed treatment plans with longand short-term goals, and new decision-making sections to guide therapeutic choices. New to this edition, videos by master clinicians enhance practical learning through visual demonstrations. The new chapters, videos, and evidence-based cases are well-suited for classroom instruction. Both novice and seasoned clinicians alike will discover invaluable insights for managing even the most challenging voice and upper airway cases. Key Updates in the Sixth Edition Expanded Content: Three new chapters addressing: The comprehensive voice evaluation Clinical decision-making Gender affirming voice care Over 25 new clinical case studies offering in-depth exploration of voice and upper airway interventions. 37 video demonstrations that provide practical examples of a range of voice therapy techniques. Find the full list here Enhanced Structure: Chapters reorganized by disorder category to facilitate seamless navigation, allowing clinicians to easily locate relevant information. Revised chapter introductions clarify key concepts and set the stage for deeper learning. Detailed Interventions: Each case now offers greater detail on therapeutic interventions, helping readers follow treatment progress step-by-step. New Co-Editor: Lauren Timmons Sund, BM, MS, CCC-SLP Additional Features In addition to the clinical cases and videos, this text offers: The voice evaluation in documentation format. Each case includes a dedicated decision-making section, aiding clinicians in creating personalized treatment plans. Cases highlight both in-person and telehealth service delivery models, reflecting current clinical practices. "Call-Out" Boxes spotlight critical topics and provide supplementary information to deepen understanding.

behavioral cough suppression therapy: Diagnosis and Treatment of Chronic Cough Sang Heon Cho, Woo-Jung Song, 2021-02-06 This book is a practical resource for clinicians who manage patients with chronic cough, which represents a major challenge in the clinic due to multiple diagnostic and therapeutic considerations. Essential assessments for cough and treatable traits are described, covering the upper and lower airways and the gastrointestinal tract, and appropriate treatments are identified according to the different findings and diagnoses. Based on recent mechanistic and clinical advances, the authors also discuss novel diagnostic and therapeutic options, including pharmacological and non-pharmacological approaches to control cough. Particular considerations of importance when dealing with chronic cough in children and the elderly are addressed separately. The book will be an invaluable guide and reference for all practitioners who require up-to-date information on how best to assess, diagnose, and treat patients with chronic cough.

behavioral cough suppression therapy: Evidence-Based Laryngology David E. Rosow, Chandra M. Ivey, 2021-02-19 This text provides a critical look at the state of the evidence in the most compelling areas of laryngology. Rather than being a comprehensive text covering every single possible area, it focuses on published works in the 9 areas that are of the most interest to laryngologists as well as speech pathologists, general otolaryngologists, and head and neck oncologists managing laryngologic issues. The state of the literature is succinctly summarized and tabulated in each area, allowing the reader to see which areas have high-grade evidence (Levels 1 or 2) to support decision making, and which areas are in need of better quality studies. Each chapter is divided into three main sections: Diagnosis and Pathophysiology, Surgical management, and Non-surgical management. This makes it easier for the reader to browse to the area of interest in each section and to find the evidence basis for a given concept. Evidence-Based Laryngology will be an invaluable resource to otolaryngologists, residents, speech-language pathologists, and other clinicians who manage laryngological problems and would like to know the evidence basis behind different treatment options.

**behavioral cough suppression therapy:** Clinical Voice Pathology Joseph C. Stemple, Nelson Roy, Bernice K. Klaben, 2025-01-13 Clinical Voice Pathology: Theory and Management, a classic text now in its seventh edition, is a comprehensive resource that addresses the history, anatomy,

physiology, etiologies, pathologies, and contemporary issues related to the assessment and management of the voice and related disorders. While continuing to provide the graduate speech-language pathology student with the knowledge necessary to evaluate and treat an impressive array of voice disorders, the text now includes two new chapters that focus on the expanding role of the speech-language pathologist in (1) upper airway disorders (including chronic refractory cough as well as inducible- and exercise-induced laryngeal obstruction), and (2) gender-affirming voice and communication training. With a foundation rooted in science, combined with the vast clinical and research expertise of the authors, students and practicing clinicians will be equipped with the knowledge necessary to effectively assess and manage not only a wide range of voice and upper airway disorders, but also individuals who seek gender-affirming voice care. Individuals with diverse voice and airway related issues, such as professional voice users, performers, patients with laryngeal cancer, or who are tracheostomy and ventilator-dependent are often complex and demand a clinician who possesses an extraordinary depth and breadth of knowledge. To facilitate the acquisition of this knowledge, this text offers a wealth of visual aids, including artwork, case studies, and a companion website with extensive audiovisual instructional materials. These features not only maintain the high standards set by previous editions but further enhance the learning experience. New to the Seventh Edition: \* A new chapter describing the SLP's roles and responsibilities in the assessment and management of upper airway disorders including chronic refractory cough (CRC), inducible laryngeal obstruction (ILO) and exercise-induced laryngeal obstruction (EILO). \* A new chapter on gender-affirming voice and communication training for transgender and gender-diverse individuals including approaches to gender-affirming health care. \* Additional extensive audio and video examples of clinical cases and related treatment outcomes. \* Instructional "how-to" videos demonstrating important procedural aspects of assessment (eg, focal laryngeal palpation, voice stimulability testing) and specific evidence-based voice therapies including manual laryngeal reposturing, circumlaryngeal massage, vocal function exercises, and resonant voice therapy. \* Continued focus on enhancements to instruction and learning, including use of "Call-Out" boxes to highlight cases and encourage additional discussion. \* Updated references throughout the text to reflect the current state of clinical research and practice. Key Features: \* New Chapters on (i) Upper airway disorders and (ii) Gender-affirming voice care \* Full-color text and images \* Numerous Call Out boxes \* Multiple helpful appendices

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symptoms and concerns in order to maximize both quality of life and longevity. It will aide otolaryngologists, laryngologists, neurologists, speech language pathologists, and other allied health care professionals in developing a more efficient, evidence-based, patient-focused, and multi-specialty approach to managing these complex and challenging patients.

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behavioral cough suppression therapy: Behavior Therapy with Children II Anthony M. Graziano, 2008-10-01 The term behavior modification refers to the systematic analysis and change of human behavior and the principal focus is on overt behavior and its relationships to environmental variables. Behavior modification can be applied in many settings, the nature of which helps to define its subsets. Thus, applied in clinical settings, toward clinical goals, it encompasses the subset behavior therapy. In Behavior Therapy with Children, Volume 2, Anthony M. Graziano focuses on behavior therapy--specifically, the behavioral treatment of children's clinical problems. The field of behavior modification encompasses an astonishingly wide and varied spectrum of concepts about and approaches to education, clinical problems, social programming, and rehabilitation efforts. A conceptually and technologically rich medium, it has been nourished by the psychology laboratory, the school, and the psychiatric clinic. It is an area with diffuse boundaries surrounding a highly

active center, within which apparently solid landmarks have already been worn away by the dissolving action of corrective self-criticism--immeasurably aided by the catalysts stirred in by the field's many critics. The activity continues, the dynamic field boils, and the medium enriches itself. There appears to be a tendency, particularly among new behavior therapists, to limit their focus too narrowly to the client's systems of overt behavior. In this project, psychological therapy begins with a personal, interactive social situation in which the generally expected human response of interest, sympathy, and support, is the minimum condition. Graziano maintains that these clinical sensitivity skills must be preserved in behavior therapy and enhance its important contribution to advancing the therapeutic endeavor. Anthony M. Graziano is professor emeritus in the Department of Psychology, State University of New York at Buffalo. He has published a number of articles in journals on subjects such as teaching machine programs, behavior therapy with children, diagnostic testing, the history of psychology, and evaluations of the contemporary mental health professions. He has been on the editorial board of Behavior Modification and on the board of directors for the Eastern Psychological Association.

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