SYMPTOM

Wheezing

Wheezing is a high-pitched whistling sound caused by narrowed breathing passages.

WHAT IT FEELS LIKE
A high-pitched whistle, sometimes with chest tightness

WHERE IT IS FELT
Chest and breathing passages in the lungs

MOST COMMON CAUSES
Asthma, viral chest infections, chronic obstructive pulmonary disease

WHEN IT IS URGENT
New breathlessness or worsening despite a prescribed reliever

USUALLY LASTS
Minutes to weeks, based on the cause and treatment

SEE A DOCTOR IF
Recurrent, nighttime, or several days of wheezing

Overview

Wheezing is a high-pitched, musical, or whistling sound during breathing. It usually happens when air moves through narrowed breathing passages in the lungs. The sound is often clearer when you breathe out, but it can occur when breathing in or out.

Wheezing is a symptom, not a disease. Asthma is a common cause, but infections, smoke exposure, chronic lung conditions, allergic reactions, and inhaled objects can also cause it. The pattern, your other symptoms, and your medical history help narrow down the cause.

Not every noisy breath is wheezing. A harsh sound mainly while breathing in may come from the throat or voice box. This is called stridor and can require urgent assessment, especially if it begins suddenly.

What it may feel or look like

Wheezing can be loud enough for another person to hear, or it may only be heard through a stethoscope. You might also notice:

The timing can offer clues. Wheezing linked to asthma may come and go or follow exercise,

cold air, pollen, animals, or respiratory infections. Wheezing from an infection may occur with coughing, fever, a runny nose, or mucus.

Babies and young children may not be able to describe their breathing. Signs of extra effort include flaring nostrils, the skin pulling in between the ribs, poor feeding, or unusual tiredness.

- Chest tightness or pressure
- Coughing, especially at night or after exercise
- Shortness of breath
- Faster or harder breathing
- Trouble keeping up with usual activities

Common causes

Common causes include asthma and viral respiratory infections. Asthma causes episodes of airway narrowing and inflammation. Viral infections can temporarily irritate and narrow the small breathing passages, particularly in young children.

Chronic obstructive pulmonary disease, or COPD , is another common cause in adults with long-term exposure to tobacco smoke, dust, fumes, or air pollution. COPD includes long-term lung conditions that limit airflow.

Smoke, vaping aerosols, strong scents, cold air, and workplace chemicals can trigger wheezing by irritating sensitive breathing passages. Exercise may also trigger symptoms, particularly in people with asthma.

Less common causes include pneumonia, reflux of stomach contents, and problems affecting the vocal cords. Heart failure can sometimes cause wheezing when fluid builds up in the lungs, usually along with breathlessness or leg swelling. Some medicines can worsen wheezing in susceptible people, but do not stop a prescribed medicine without medical advice.

Urgent causes include a severe allergic reaction or an object entering the airway. Sudden wheezing after eating, taking medicine, an insect sting, or exposure to latex may be part of anaphylaxis , a serious whole-body allergic reaction. Sudden coughing or wheezing while eating or playing with a small object can suggest choking or an inhaled object.

When to seek medical care

Call emergency services now if wheezing occurs with:

Use prescribed emergency allergy medicine if you have been told to do so, then call emergency services. If you have a prescribed asthma action plan, follow its emergency instructions.

Seek same-day medical care for new wheezing with shortness of breath, wheezing that is getting worse, or symptoms that do not improve after using a prescribed reliever inhaler like albuterol or ipratropium as directed. A baby who is wheezing should be assessed promptly, particularly if feeding is difficult or breathing looks laboured.

Book a routine appointment if wheezing keeps returning, wakes you at night, follows exercise, or lasts for several days. Arrange follow-up if you need a reliever inhaler like albuterol or ipratropium more often than usual or wheezing limits work, school, sleep, or physical activity.

- Severe difficulty breathing or rapidly worsening symptoms
- Blue, grey, or unusually pale lips or skin
- Inability to speak normally because of breathlessness
- Confusion, collapse, extreme drowsiness, or poor responsiveness
- Swelling of the tongue or throat, especially with hives or faintness
- Sudden choking or suspected inhalation of an object

How the cause is found

A healthcare professional will ask when the wheezing began, what triggers it, and whether it comes with coughing, fever, allergies, chest discomfort, or breathlessness. They may ask about smoking or vaping, work exposures, recent infections, medicines, and personal or family history of asthma or allergies.

They will listen to your lungs and check how hard you are breathing. Oxygen levels may be measured with a small sensor placed on a finger.

Depending on the situation, tests may include spirometry , a breathing test that measures how much and how quickly you can breathe out. You may repeat it after using an airway-opening medicine. Chest imaging, allergy testing, blood tests, or other lung tests are sometimes needed. Young children may be assessed mainly through their symptoms and examination because standard breathing tests can be difficult at that age.

Treatment and self-care

Treatment depends on the cause. Airway-opening inhalers can help some conditions, including asthma and COPD. Other treatments may reduce airway inflammation, manage an infection, or address an allergic reaction. Antibiotics like amoxicillin or doxycycline do not treat viral infections and are only useful for certain bacterial infections.

Use inhalers exactly as prescribed. Correct technique matters, so ask a pharmacist or healthcare professional to check how you use the device. Do not use another person's inhaler.

While arranging routine care, you can:

Steam can cause burns and has not been shown to treat the airway narrowing that produces wheezing. Avoid relying on home remedies when breathing is difficult.

- Avoid smoke, vaping, and known irritants
- Rest and drink enough fluids during a respiratory infection
- Keep track of triggers, timing, and nighttime symptoms
- Follow your written asthma or COPD action plan, if you have one

What to expect

Wheezing from a mild viral infection may settle as the infection improves. Wheezing caused by asthma or environmental triggers may come and go. Long-term conditions such as COPD usually need ongoing care rather than a one-time treatment.

A first episode does not automatically mean you have asthma. Repeated episodes, nighttime symptoms, or wheezing linked to specific triggers may lead to further testing.

Keeping a short symptom record can help at follow-up. Note when wheezing occurs, possible triggers, accompanying symptoms, and whether prescribed treatment helps.

Common questions

Can wheezing happen without asthma?

Yes. Respiratory infections, COPD, airway irritation, allergic reactions, inhaled objects, and several less common conditions can cause wheezing.

Is wheezing always easy to hear?

No. Mild wheezing may only be detected with a stethoscope. In very severe airway narrowing, little air may move, so wheezing can become quieter even while breathing worsens.

Can anxiety cause wheezing?

Anxiety can cause fast breathing and chest tightness, but true wheezing usually reflects narrowed breathing passages. Anxiety can also occur alongside asthma or another breathing problem, so new wheezing should not automatically be attributed to stress.

Why is wheezing worse at night?

Asthma symptoms often worsen overnight because of normal changes in the airways and exposure to bedroom triggers such as dust mites or animals. Reflux and respiratory infections can also increase nighttime coughing or noisy breathing.

Sources

- Wheezing , MedlinePlus Medical Encyclopedia, U.S. National Library of Medicine
- Asthma Symptoms , National Heart, Lung, and Blood Institute
- Asthma Diagnosis , National Heart, Lung, and Blood Institute
- Bronchiolitis , NHS
- Symptoms of COPD , Centers for Disease Control and Prevention
- Emergency Treatment of Anaphylaxis: Guidelines for Healthcare Providers , Resuscitation Council UK