

"Bronchiectasis is a lung condition with abnormal permanent airway dilatation. It is a recurrent cough and colds."



CHEST CARE CLINIC, KHARGHAR

Dr. VISHAL GUPTA- CHEST SPECIALIST

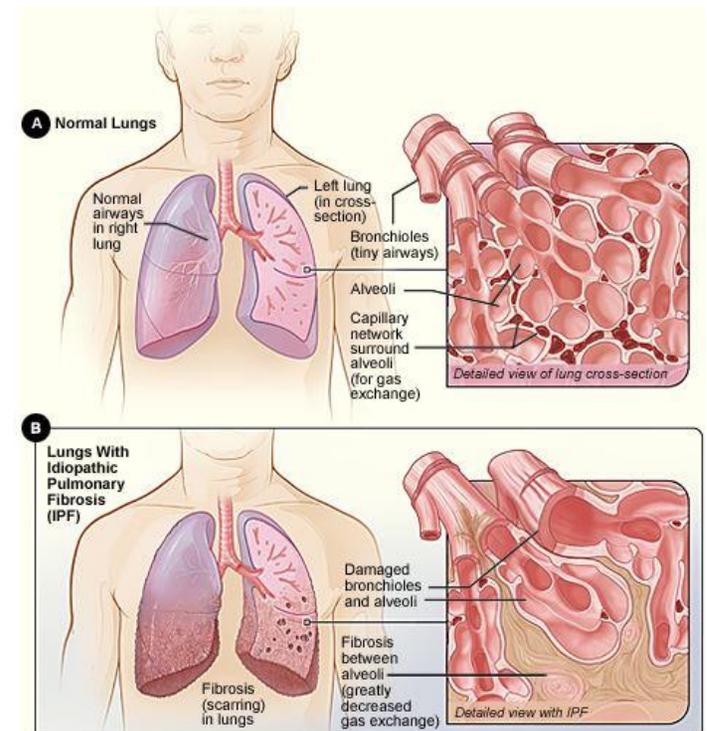
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**TIMINGS: MON TO SAT , 10:00 AM TO 1:00 PM
AND 5:00 PM TO TO 9:00 PM. SUNDAY CLOSED**

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WHAT DO YOU MEAN BY BRONCHIECTASIS?



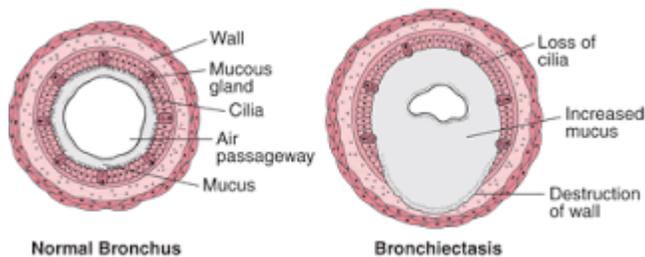
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THIS INFORMATION IS INTENDED FOR PATIENT EDUCATION ONLY

Bronchiectasis is a lung condition with abnormal permanent airway dilatation. It is a recurrent cough and colds. Not usually progressive or life threatening complication. Should it be progressive then will need aggressive management. Infections like TB need to be excluded prior to starting treatment for bronchiectasis. Regular bronchial hygiene and exercise is extremely helpful. As needed appropriate inhalers used for symptom management.

Bronchiectasis is a condition where the bronchial tubes of your lungs are permanently damaged, widened, and thickened. These damaged air passages allow bacteria and mucus to build up and pool in your lungs. This results in frequent infections and blockages of the airways.

There is no cure for bronchiectasis, but it is manageable as it does not show progress in majority of cases. This should be done by informed with your doctor. With treatment, you can typically live a normal life. However, flare-ups of infection and swelling of the bronchial tubes must be treated quickly to maintain oxygen flow to the rest of your body and prevent further lung damage.



So What are the causes of bronchiectasis?

Any lung injury can cause bronchiectasis. There are two main categories of this condition. One is related to known causes including cystic fibrosis, and secondary to previous lung infections like tuberculosis, post viral infections, and post allergic reaction to fungus like aspergillosis (ABPA).

It may also be seen variably after smoke exposure and in COPD with smokers. Cystic fibrosis (CF) is a genetic condition that causes an abnormal production of mucus. The other category is unknown causes bronchiectasis, which isn't related to CF. The most common known conditions that can lead to such bronchiectasis includes :-

1. An abnormally functioning immune system.
2. Inflammatory bowel diseases.
3. Autoimmune diseases.
4. Interstitial lung disease.
5. Alpha 1- antitrypsin deficiency (an inheritable cause of COPD).
6. HIV.

The treatment of the know causes is better and less progressive with predictable outcomes however that of unknown causes is difficult without more detailed evaluation.

What tests you should expect in your case?

Every patient can have single or multiple factors involved making it a tailored approach to him /her. Most bronchiectasis patient have a cough and sputum frequently.

Test include

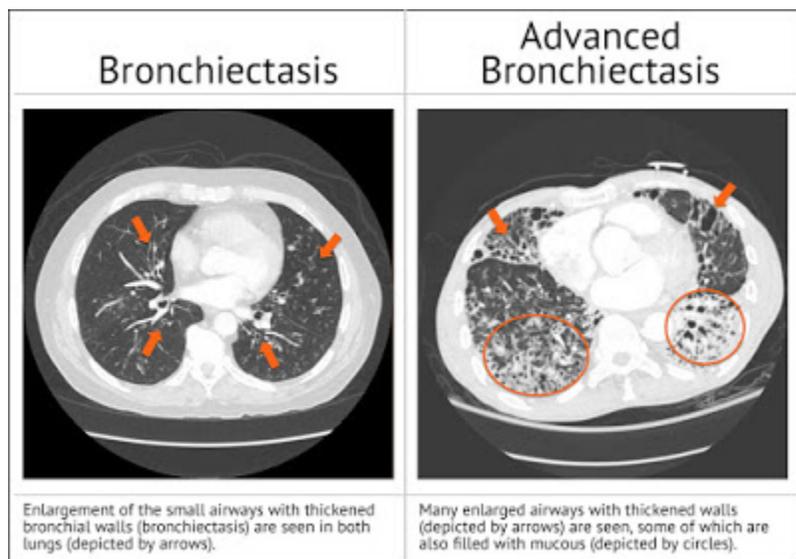
Xray chest.

Routine blood evaluation.

CRP to evaluate and monitor infection status.

Sputum evaluation for active Tb disease and other associated infections.

Advanced tests like bronchoscopy needed in specific situations only. PFT and Ct chest on a case to case basis.



Progression of symptoms may give additional information so follow up is as important as tests to diagnose. ICU may be needed in the case of Respiratory failure.

What diseases look like can be confused with bronchiectasis?

- Tuberculosis
- Aspergillosis allergy (ABPA) Interstitial Lung Disease Lung cancers
- Pneumonias
- COPD.

The difference and need for change in the treatment course best decided by the specialist. Please discuss with your doctor in case of doubts.

What treatment am I expected to follow?

Bronchiectasis is a permanent airway dilatation and infection colonisation and may have variable exacerbation depending upon the progression of individual cases. Regular exercise will help maintain a fit and energetic body physique leading to better outcomes even with advanced disease.

Exercises include :-

- Yoga/Aerobic exercises
- Breathing exercises to control airflow and better confidence in self-care are especially helpful.
- Medication are temporarily useful but especially those with breathing difficulty or frequent cough and colds.
- Infections must be controlled and prevented by standard hand face hygiene and avoiding travelling to crowded locations.

Some cases are progressive needing aggressive management. May consider surgical lung removal. May need hospitalisation and aggressive treatment in few cases due to complications.

What are the complications of bronchiectasis?

Complications including :-

1. Pneumonias.
 2. Drug resistant infections.
 3. Amyloidosis and Respiratory failure.
- They need urgent intervention with the doctor.