Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Bronchiectasis

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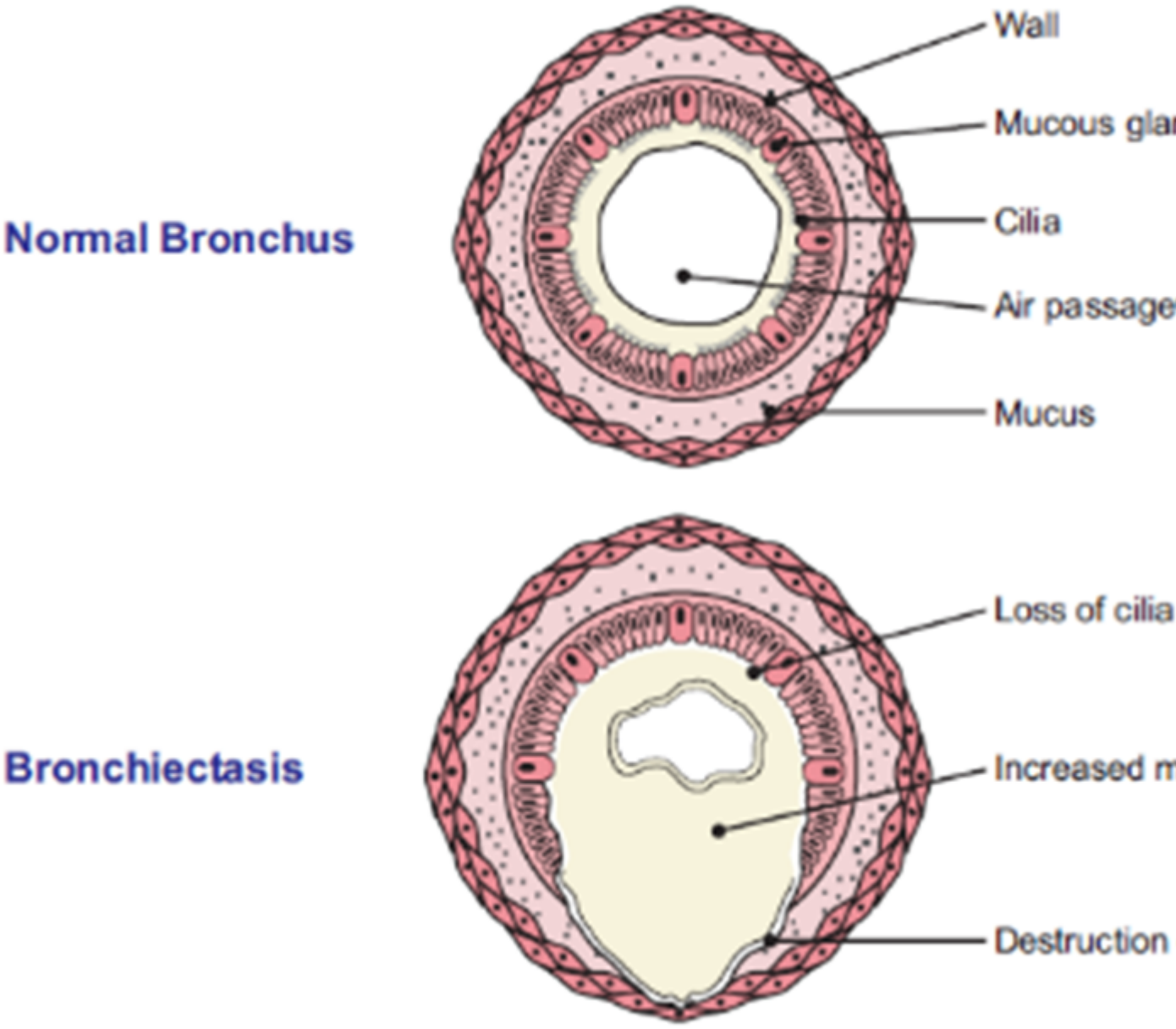
Patient Information

Respiratory Medicine

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What is bronchiectasis?

Bronchiectasis is a secondary chronic lung condition affecting the tubes (bronchi) which carry air through the lungs. This means it is generally caused by something else, for example, asthma. In people with bronchiectasis, some of these tubes become permanently widened/bigger and damaged, causing mucus (also known as sputum or phlegm) to stick and it can be difficult to clear from the lungs; this makes them prone to infection. Most patients will have symptoms for many years before a diagnosis is made.



How is it diagnosed?

We will ask you questions in relation to how you have been with any chest issues.

We may send you for some tests that can help diagnosis bronchiectasis.

These include:

- A scan of your chest - High resolution CT (HRCT), which can identify bronchial tube widening.
- A lung function test – this measures how well the lungs are working and if there is narrowing or blockage of the airways.
- We will ask you to send a sputum sample to check if there is any bacteria or other organisms in the sputum / phlegm.

Blood tests may be requested to measure immune function and the presence of other conditions which may cause bronchiectasis.

What causes it?

There are numerous causes for bronchiectasis these include:

- asthma
- chronic Obstructive airway disease (COPD)
- pulmonary Fibrosis
- repeated lung infections,
- defects of the immune system

- hereditary disorders (these conditions commonly lead to failure of the normal mechanisms that clear infection and inflammation from the lung, which leads to lung damage)

- In some cases, there is no cause; this is known as idiopathic (not sure why it happens)

What are the symptoms?

The main symptoms are:

- chronic cough (cough you have had for longer than 3 months) with increased sputum production.

- recurring chest infections which need antibiotics

- chest pain

- shortness of breath / wheeze

- tiredness and exercise limitation

- chronic sinus inflammation

- heartburn

What treatments are available?

The main aims of treatment are to decrease the inflammation and infection in the airways to

keep your general health good.

This is generally achieved with:

- **Airways clearance programme:**

a daily routine, prescribed by a respiratory physiotherapist, to help clear sputum out of the lungs, with the aim of decreasing the risk of infection. This will help you cough up the sputum more easily.

This airway clearance programme may include breathing exercises, positive expiratory pressure devices (Flutter, Pari PEP etc) – these will be explained and discussed further if required, and/or breathing in of saline via a nebuliser.

- **Exercise programme:**

a prescribed exercise programme (via a physiotherapist) is important to help increase airway clearance and for general wellbeing.

- **Bronchodilators:** can be via an inhaler or nebuliser, which expands your airways making it easier to breathe

- **Sinus management:** nasal sprays, sinus rinsing with saline (will be discussed by doctor/nurse)

- **Gastro-oesophageal reflux (heartburn) management*:*** prescribed medication, education via doctor/nurse

- **Antibiotics:** either oral (via the mouth), intravenous (via the vein) or inhaled (breathed in via nebuliser).

How can I help myself?

- Complete your daily airway clearance routine
- if you are smoking – stop – discuss - smoking cessation referral.
- keep up to date with immunisations - influenza and pneumonia vaccinations (via GP/community team)
- eat a well-balanced diet
- drink plenty of fluids (unless prescribed a fluid restricted diet)
- exercise, singing, dancing and laughter all help to clear mucus

How do I know if I have an infection (exacerbation)?

If you have more than 2 of these symptoms, you may have an infection:

- increased cough
- increased amount of sputum
- darker sputum
- thicker sputum
- feeling more tired than usual
- sore throat / runny nose
- increased shortness of breath or feelings of breathlessness

If you have any of these symptoms, you are highly likely to have an infection:

- new or increased blood in your sputum*****
- an increased temperature / fever / sweats
- loss of appetite

*Spots or flecks of blood in the sputum are not uncommon in

Bronchiectasis, but if there is more than 2 ml, or if bleeding persists,

you should see your doctor.

What is an action plan?

An action plan is your self-management plan that you have discussed with your medical team for when you are both well and unwell.

When you are well

- take your regular medications
- do your airway clearance as prescribed
- exercise regularly
- eat well and drink plenty of fluids

When you are unwell

- send a sputum sample via your GP/community team

- increase your airway clearance sessions
- get enough rest (do not exercise if you have a fever)
- increase your fluid intake and eat well
- start antibiotics as discussed with your doctor

Seek medical attention within 48 hours if you do not improve.

As soon as your symptoms have settled, resume your normal airway clearance routine and exercise programme.

References

https://bronchiectasis.com.au/wp-content/uploads/2015/12/Bronchiectasis-Patient-Information-Booklet1.pdf

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