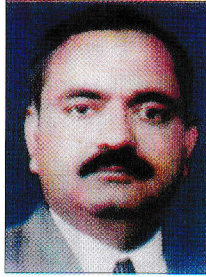


BRONCHIECTASIS



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DEFINATION

Bronchiectasis is defined as the permanent dilatation of one or more bronchi due to destruction of muscle and elastic supporting tissue resulting from or associated with chronic necrotizing infections.

ETIOLOGY

1. Infections
2. Bronchial Obstructions
3. Congenital abnormalities

CLINICAL FEATURES

- The characteristic symptoms are continuous cough and sputum production. Sputum can be copious in extensive disease and is frequently purulent.
- Changes of posture such as bending down or turning in bed can elicit productive cough (postural cough).
- A history of recurrent hemoptysis, pneumonia and pleurisy is relatively common, massive hemoptysis can be fatal.
- Breathlessness is a feature of extensive bronchiectasis

SIGNS

- The most consistent physical finding is the presence of coarse crepitations constantly at the same site.
- Finger clubbing is common in patients producing purulent sputum persistently.
- Foul breath.
- Wheezing.
- In many patients there are no abnormal finding.

INVESTIGATIONS

- Sputum examination,
- X-Ray chest.
- Pulmonary function test.
- Sputum culture.
- Echocardiography.
- HRCT chest.
- Sinus radiography.
- ECG.

DIFFERENTIAL DIAGNOSIS

Common differential diagnosis of bronchiectasis includes.

- Chronic Bronchitis
- Pulmonary tuberculosis
- Recurrent pulmonary infarction.
- Bronchial adenoma

MANAGEMENT

Bronchiectasis is primarily a preventable disease.

Bronchiectasis can be prevented by:-

- Using vaccines
- Use of appropriate antibiotics in time
- Proper management of unconscious patients.
- Proper care during anaesthesia
- Proper care during ENT Surgery
- Postural Drainage,
- Antibiotics
- Bronchodilator
- Specific therapy
- Surgery
- Management of complication.

COMPLICATIONS

- Infective exacerbation
- Pneumonia
- Hemoptysis
- Pleurisy
- Sinusitis
- Pneumothorax
- Brain abscess
- Empyema
- Amyloidosis
- Bronchopleural fistula
- Corpulmonale
- Fungal colonization of the bronchi
- Respiratory failure
- Apegiloma