Chronic Lung Sickness
(Bronchiectasis)

In Partnership

Queensland Government

menzies
school of health research
The Lungs

- You have two lungs.
- They sit inside your chest, above your stomach and surround your heart.
- The lungs have a very important job inside your body.
• When you breathe in, air enters the lungs.

• The air enters in through your mouth/nose and travels down your windpipe.

• The wind pipe then divides into two smaller air tubes.

• One air tube goes into the left lung and one into the right lung (left and right bronchus).

• The air tubes then branch out into smaller air tubes (bronchioles).

• The air travels through the lungs and enters the body as oxygen.
The Lungs

- The smaller air tubes (bronchioles) look like the branches of an upside down tree. At the end of the bronchioles are tiny little air sacs that look like tiny bunches of grapes, these are called alveoli.

- The air sacs (alveoli) have an important job of giving the good air (oxygen) to your blood and taking the used air (carbon dioxide) out.
The Lungs

You breathe in good air called oxygen and you breathe out used air called carbon dioxide.

The good air (oxygen) you breathe goes into your lungs then goes into your blood. Oxygen gives your body energy to work properly.
Chronic Lung Sickness (Bronchiectasis)

Healthy

Unhealthy
What is chronic lung sickness?

- Wet cough that comes and goes or stays for a long time.

- Breathing tubes (bronchioles) have become sick and don’t work as well as healthy breathing tubes.

- Sick breathing tubes will mean that people will get more chest infections and their lungs will be weak.
Your doctor may call chronic lung sickness, ‘bronchiectasis’. This disease causes the breathing tubes to become damaged.

Damaged airways cause lots of spit to sit inside the breathing tubes. Sometimes it can be hard to get rid of, which causes cough and infections.
What causes chronic lung sickness?
(Bronchiectasis)

Being sick with lots of lung infections when you were younger.

Adults who get lots of chest infections/tuberculosis (TB).

Blockage in the airway.

Sometimes we don’t know what causes it.
Risks for getting chronic lung sickness (Bronchiectasis)

Lots of people living in one house (overcrowding).

Children that are born very small are more at risk.

Some people may be born with lower protection against infection.

If you have lots of lung infections when you were younger.
Signs and symptoms

Trouble breathing/short wind.

Feeling tired and weak.

Wet sounding cough that lasts a long time or keeps coming back.

Coughing up a lot of spit, which can be green/yellow.

Wheeze (noisy breathing).

Sometimes rounded finger tips (clubbing).

Yellow nails.

Weight loss.

Coughing up blood.

Chest pain.

You may not have all of these signs and symptoms!
What tests might be done?

There are tests for chronic lung sickness (bronchiectasis) that will help the doctor to decide what treatment is best for you.

- Spit test.
- Chest X-ray.
- Blood test.
- Bronchoscopy to look inside your air tubes
- Special x-ray (CT scan).
- Exercise test.
- Sweat test.
- Lung function test/spirometry.
- Echocardiogram (heart test).
Treatment of chronic lung sickness (Bronchiectasis)

It is important to visit your doctor/health clinic often for check ups.

Visit your doctor or clinic when you are sick.

They will give you antibiotic medicine to help you get better. You need to take them until they are finished. Sometimes this could be for a long time (more than 2 weeks).
Treatment of chronic lung sickness (Bronchiectasis)

Antibiotic medicine may also be given through a nebuliser (mouth piece or mask).

Some people might use puffers with spacers to help with their breathing (open up your airways).

Oxygen.

If the infection is in a small area of the lung, sometimes the doctors will remove it by an operation.
You might see a physiotherapist, who will teach you some exercises you can do every day.

These exercises help you to loosen and cough up the spit inside your lungs. This can help reduce chest infections.

Exercises can be done with special breathing equipment.

Chest drainage.

There are some special stretches you can do to help exercise the lung.
Pulmonary rehabilitation is a program for people who have chronic lung sickness. The program will help you feel better.

Lots of people will work with you to make a good program that will help you feel better.

The program will look at things like:

- Exercises.
- Helping you to understand your lung disease.
- Good ways to get the best out of food.
- Services that may help you to manage better.
Things to remember

Some people with Bronchiectasis will often have other chronic diseases such as:

- Heart disease.
- Asthma.
- Diabetes.
- COPD.

It is very important to understand and look after these diseases.
Ways to help improve your lungs

- Quit smoking.
- Visit your doctor/clinic
  - when you are well.
  - when you are sick.
- Keep a healthy weight.
- Eat small meals often.
- Stopping getting germs by keeping yourself clean.
- Make sure you get all your immunisations like the flu needle every year.
Are you becoming more sick?

People with chronic lung sickness have more risk of getting chest infections. Some things to look out for are:

- Cough getting worse?
- You have more short wind and it is getting harder to breathe?
- You’re feeling hot?
- Do you feel more tired and weak than usual?
- You don’t feel like eating or drinking?
Why do we need to look after our lungs?

Strong lungs can help you enjoy your life.

If your lungs are sick, it is important to understand the sickness.

You need to know how to look after your sickness.

People with weak lungs can go on to have other problems later in life like heart problems.

Lots of people with lung sickness, spend a lot of time in hospital.
Acknowledgments

The Bronchiectasis flipchart is an initiative of the Queensland Health Statewide Respiratory Clinical Network and the Menzies School of Health Research and funded by Queensland Health and Menzies School of Health Research, Darwin.

The flipchart was developed in consultation with:

- Indigenous Respiratory Health Work Group, Queensland Health Statewide Respiratory Clinical Network
- Menzies Child Health Division, Indigenous Reference Group
- Chronic Obstructive Pulmonary Disease (COPD) Work Group, Queensland Health Statewide Respiratory Clinical Network
- The Asthma Foundation Northern Territory
- The Australian Lung Foundation
- Department of Health and Families, Northern Territory Government

We need to thank all the many individuals, patients and other health providers who have provided feedback on the flipcharts.

Copyright:
This work is copyright and copyright ownership is shared between State of Queensland (Queensland Health) and Menzies School of Health Research 2011. It may be reproduced in whole or in part for study, education or clinical purposes subject to the inclusion of an acknowledgement of the source. It may not be reproduced for commercial use or sale. Reproduction for purposes other than those indicated above requires written permission from both Queensland Health and Menzies School of Health Research, Northern Territory.

© State of Queensland (Queensland Health) and Menzies School of Health Research, Northern Territory 2011

http://creativecommons.org/licenses/by-ne/3.0/au/

For further information contact Statewide Respiratory Clinical Network, Patient Safety and Quality Improvement Service, e-mail: PSQ@health.qld.gov.au or phone: (07) 36369505 and Menzies School of Health Research, e-mail: lunginfonet@menzies.edu.au or phone: (08) 89228196. For permissions beyond the scope of this licence contact: Intellectual Property Officer, Queensland Health, email ip_officer@health.qld.gov.au, phone (07) 3234479.

To order resources or to provide feedback please email: Lunginfonet@menzies.edu.au or phone (08) 89228196

Suggested Citation:
ISBN: 978-1-921576-56-0