

STEPWISE MANAGEMENT OF STABLE BRONCHIECTASIS

General Management of Bronchiectasis in Adults

- Airway clearance
- Influenza and pneumonia immunisations
- Pulmonary rehabilitation
- Smoking cessation
- Sputum surveillance
- Prompt treatment of exacerbations
- Treat underlying cause*
- ICS/LABD only for concomitant asthma or COPD*

	Mild	Moderate	Severe
	or persistent symptoms despite standard care		
Typical symptoms	<ul style="list-style-type: none"> ⊙ few symptoms ⊙ breathless on moderate exertion ⊙ recurrent chest infections ⊙ little or no effect on daily activities 	<ul style="list-style-type: none"> ⊙ breathless walking on level ground ⊙ increasing limitation of daily activities ⊙ Increased cough and sputum production ⊙ exacerbations requiring oral corticosteroids and/or antibiotics 	<ul style="list-style-type: none"> ⊙ breathless on minimal exertion ⊙ daily activities severely curtailed ⊙ experiencing regular sputum production and chronic cough ⊙ exacerbations of increasing frequency and severity
Airway Clearance Techniques	<p>Daily physiotherapy - consider strategies such as Active Cycle Breathing Technique and Forced Expiration/Huff Technique</p> <p>Physiotherapy adjuncts - consider introducing devices and hyperosmolar agents</p>		
Pharmacological Interventions	<p>Inhaled corticosteroids - selected patients only Macrolides - consider macrolides for patients with frequent exacerbations (exclude presence of NTM)</p> <p>Inhaled antibiotics* - for new Pseudomonas aeruginosa colonisation</p>		

REFER PATIENTS TO LUNG FOUNDATION AUSTRALIA FOR INFORMATION AND SUPPORT – FREECALL 1800 654 301

Lung Foundation Australia has a range of resources to promote understanding of Bronchiectasis and assist with management.



Lung Foundation Australia

1800 654 301 | Lungfoundation.com.au

*specialist referral recommended