### 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

- Few symptoms
- Breathless on moderate exertion
- Recurrent chest infections
- Little or no effect on daily activities

#### Moderate

- Breathless walking on level ground
- Increasing limitation of daily activities
- Increased cough and sputum production
- Exacerbations requiring oral corticosteroids and/or antibiotics

#### Severe

- Breathless on minimal exertion
- Daily activities severely curtailed
- Experiencing regular sputum production and chronic cough
- Exacerbations of increasing frequency and severity

#### Airway Clearance Techniques

- **Daily physiotherapy**
  - Consider strategies such as Active Cycle Breathing Technique and Forced Expiration/Huff Technique

- **Physiotherapy adjuncts**
  - Consider introducing devices and hyperosmolar agents

#### Pharmacological Interventions

- **Inhaled corticosteroids** - Selected patients only
- **Macrolides** - Consider macrolides for patients with frequent exacerbations (exclude presence of NTM)
- **Inhaled antibiotics**
  - For new Pseudomonas aeruginosa colonisation

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**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.

*Specialist referral recommended*