

Pulm onologic physiotherapy

Dorottya Szabó Physiotherapist MsC Pécs University Medical School Sportmedicine Center



Examination

- Past medical hystory in family (inherited deseases)
- 2. Own past medical hystory
- medicaments
- jobs
- smoke

Symptoms

- 1 Cough (productive)
- 2. Dyspnoe
- 3. Pain in chest

Examination

- Inspection
- Deformities
- Scaron chest
- Cyanotic sign on lips, nails
- Breathing frequency
- Palpation
- symmetric movement of chest



- Percussion
- Auscultation
- Imaging procedures (X-Ray, MRI, CT, bronchoscopy,etc.)
- Biological sputum examination
- Respiratoric examination

- Restrictive pulmonary flow
- Epidemiology 9-10 %over 40 aged globally
- Cause of death ranks 4-6. worldwide over
 45 aged
- Hungary:approx.5-600 000 patient among over 40 aged

 Classification (GOLD - Global initiative for chronic Obstructive Lung Disease)

Seriousness	FEV1%
light (GOLD 1)	≥80
medium (GOID 2)	50-79
serious (GOLD 3)	30-49
very serious (GOLD 4)	⊲0

- Etiology
- Extrinsic factors:

Smoking

Occupational dust and chemicals

Intrinsic factors:

Lack of alantitrips in

Symptoms:

- Coughing
- Sputum
- Dyspnoe

Complications:

- Muscle hypo-, atrophy

Therapy

Aim: (What to do..?)

- reduce complaints, symptoms, improve exercise tolerance
- slowing the deterioration of respiratory function
- preventing and reducing the frequency and severity of flare-ups
- prevention and treatment of complications
- prolonging the life of the product is appropriate quality of life

Therapy

Methods (How to do..?)

- 1. Medical treatment
- Drug treatment
- Give up smoking
- Oxygen therapy
- 2. Additional treatment

Dietician

Psyco-social supporting

- 3. Physiotherapy in COPD (individual)
- A) Patient education
- B) Exercise therapy
- 6-8-weeks long
- 2x/week
- Repeatable 6-12 monthly
- Chest physiotherapy (sputum evacuation)
- Endurance training (intervall training)
- Resistance training
- Breathing exercises
- Electrotherapy
- C) Climate therapy





Thank you for attention!