

HOLLISTIC APPROACH IN PULMONARY REHABILITATION OF SEVERE LUNG TUBERCULOSIS STILL IN ACTIVE TREATMENT

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Background:

Pulmonary rehabilitation (PR) is most often mainly focused on patients with chronic obstructive pulmonary disease (COPD). Lung tuberculosis (TBC) may cause severe destruction of pulmonary parenchyma resulting in severe obstructive and restrictive pulmonary function sequelae. We present a case of a patient who was reffered to our institution for PR after TBC lung infection caused severe radiographic and functional sequelae on lungs.



Conclusion:

Our case represents a hollistic approach in a PR of a patient with TBC still in active treatment. By forming a multidisciplinary team and implementing PR in patients treated for TBC early during their active treatment we could manage to slow down the process of lung function impairment.

Case:

A 43- year old female patient, former smoker, was reffered to our insutitution for PR after severe lung TBC. She was currently treated with rifampicin and isoniasid which was planned to last 12 months. On advance she was malnourished with BMI of 19.2 kg/m2. Her most recent computed tomography revealed multiple cavernae of the both lungs with clusters of perilymphatic distribution and consolidations. Her lung function was heavily impaired with FVC 55% (2.26 L) and FEV1 46% (1.53 L) with lung diffusion capacity for CO of 69% and VA of 51%. Patient was included in program of pulmonary rehabilitation (PR), initially online followed by live sessions in our institution. Strength and function of respiratory muscles were preserved but there was significantly decreased strength of skeletal muscles. Her functional ability for walking was also decreased. During 6-Minute Walking Test she made 76 % of estimated value followed by intensive dyspnoea. Her sacropenic index (SI) was 5.5kg/m2 which indicated high risk for sarcopenia so she was advised by endocrinologist and nutrition expert who made optimal nutrition plan for her. The main goals of PR are improving lung function and increasing skeletal muscle mass by providing interventions such as breathing exercises, strength exercises and conditioniting.