BRONCHITIS

An inflammation of the large airways of the lung & is usually self-limited to a period of 3 weeks.

Primary manifestation is cough (with or w/out sputum) & exclusion of pneumonia by clinical evaluation or CXR.

Pathophysiology.

- Respiratory viruses are the most common cause of acute bronchitis.
 - Include influenza A & B, parainfluenza, RSV, coronavirus, adenovirus & rhinovirus.
- Atypical bacteria can cause acute bronchitis in otherwise healthy individuals.
 - M. pneumoniae, C. pneumonia & bordetella pertussis.

Clinical Features.

- Fevers, chills, myalgias/arthralgias.
- Pharyngitis
- Headache
- Cough
 - Can persist for 10-20 days.
 - ~50% report purulent sputum.

Up to 40% of patients w/ acute bronchitis will have significant reductions in FEV1 or bronchial hyperreactivity.

Treatment.

- Routine ABx therapy is not indicated as most cases are viral in origin.
 - However, in practice most people receive extended-spectrum ABx on their first presentation.
 - ABx may reduce duration of cough by 0.6 days (but not no. of 'ill' days).
- Symptomatic relief may be achieved w/ antitussives (codeine) or mucolytics.
- Bronchodilators may help with airflow limitation.