

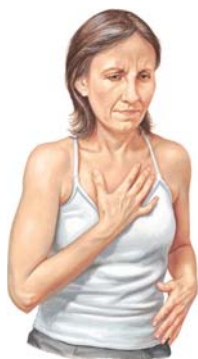
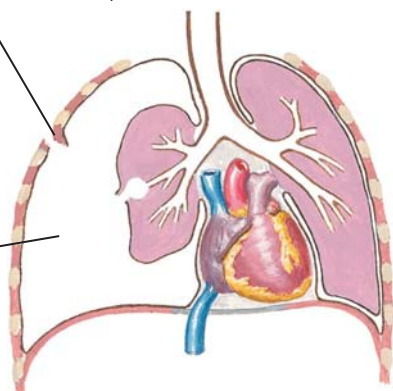
MANAGING YOUR PNEUMOTHORAX

Pneumothorax is a condition in which air leaks from a hole in a lung and gets trapped in the space between the lung and chest wall. When air gets into this space, the lung collapses.



An opening letting air leak out can be caused by injury (traumatic) such as a puncture or by bursting of a lung bleb (spontaneous pneumothorax) from hard coughing or unknown reason.

Lung collapse because air leaks into the space through a hole in the chest wall, or a leak in the lung lets air out.



The most common symptoms are shortness of breath and sharp chest pain. Others are fainting and fatigue.



Your doctor will take your medical history and examine you. The doctor can hear decreased loudness of breath sounds on one side of the chest with a stethoscope. A chest x-ray can confirm pneumothorax and exclude other causes of shortness of breath.

What Is Pneumothorax?

Pneumothorax is a condition in which air leaks from a hole in a lung and gets trapped between the lung and the chest wall (the pleural space). A small amount of fluid in this space normally keeps the outside of the lung from getting stuck against the inside of the chest. This keeps the lung expanded. When air gets into the pleural space, the lung partly or completely collapses.

What Causes Pneumothorax?

Air leaking into the pleural space through a hole in the chest wall or a leak in the lung that lets air escape causes pneumothorax. Traumatic pneumothorax results from an injury such as a puncture of the chest wall or a broken rib that punctures the lung.

Spontaneous pneumothorax can occur in people with emphysema and in tall, very thin people. A hard cough makes part of the lung burst and air leak from the lung. Spontaneous pneumothorax may run in families. About 9 of 100,000 people in the United States have this condition each year.

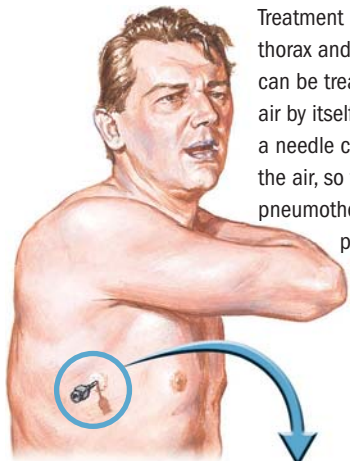
What Are the Symptoms of Pneumothorax?

The most common symptoms are shortness of breath and sharp chest pain, especially when inhaling and exhaling. Others are fainting and fatigue.

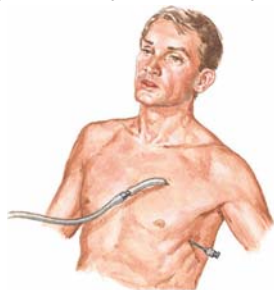
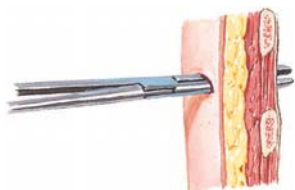
How Is Pneumothorax Diagnosed?

The doctor will take a medical history and do a physical examination. The doctor will hear decreased loudness of breath sounds on one side of the chest with a stethoscope. A chest x-ray can confirm pneumothorax. The doctor will check the oxygen level in the blood and check the heart with electrocardiography (ECG). The ECG measures the heart's electrical activity.

MANAGING YOUR PNEUMOTHORAX



Treatment depends on the degree of pneumothorax and the cause. A small pneumothorax can be treated by letting the body absorb the air by itself. With a slightly larger pneumothorax, a needle can be put into the chest to remove the air, so the lung expands. A larger pneumothorax may need to have a chest tube placed to remove the air. A machine draws out the air so the lung expands. For a large leak, the tube may need to stay in for a few days.



Don't smoke. Smoking increases your risk of pneumothorax and may cause coughing.



Tell your doctor if you're pregnant.



Call your doctor if you have a temperature higher than 101° F or see pus coming from your chest tube. You could have an infection.



Call your doctor right away if you have shortness of breath. Your lung could be collapsing.

How Is Pneumothorax Treated?

Treatment depends on the degree of pneumothorax and the cause. A small pneumothorax can be treated by letting the body absorb the air by itself. For a larger pneumothorax, a needle can be put into the chest to remove the air so the lung expands. A large pneumothorax may need to have a chest tube put into the chest to remove the air. A suction machine connected to the tube draws out the air so the lung expands. If the leak is large, the tube may need to stay in for a few days to keep the lung expanded until the leak heals.

DOs and DON'Ts in Managing Pneumothorax:

- ✓ **DO** tell your doctor about your other medical problems.
- ✓ **DO** tell your doctor about your medicines, both prescription and over-the-counter.
- ✓ **DO** tell your doctor if you're pregnant.
- ✓ **DO** call your doctor if your symptoms get worse.
- ✓ **DO** call your doctor if you have a fever (temperature higher than 101.0° F) or see pus coming from your chest tube. You could have an infection or pneumonia.
- ✓ **DO** call your doctor if your symptoms come back, if you had pneumothorax before. Up to 50% of people with spontaneous pneumothorax have another pneumothorax.
- ✓ **DO** call your doctor right away if you have sudden onset of shortness of breath. Your lung could be collapsing.
- ⊗ **DON'T** try to remove the chest tube by yourself.
- ⊗ **DON'T** exert yourself or cough too much, which can lead to air leaks.
- ⊗ **DON'T** smoke. Smoking increases your risk of pneumothorax and may cause coughing.

FROM THE DESK OF

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FOR MORE INFORMATION

Contact the following sources:

- American Lung Association
Tel: (800) LUNG-USA (586-4872)
Website: <http://www.lungusa.org>