Children's Hospital of Illinois

PULMONARY EXACERBATIONS IN CYSTIC FIBROSIS
INFORMATION SHEET

WHAT IS A PULMONARY EXACERBATION?

People with cystic fibrosis (CF) have chronic infection in their lungs caused by thick and sticky mucus that block the airways (breathing tubes). This mucus irritates the lungs and causes inflammation (swelling). In addition, the lungs of people with CF also contain bacteria that live in the mucus and breathing tubes. When people with CF have an infection, allergies, sinusitis or sore throat, they can have increased problems with their lungs. This is called a pulmonary exacerbation.

WHAT ARE THE SYMPTOMS?

A pulmonary exacerbation usually presents with increased respiratory symptoms such as cough and increased chest congestion or sputum production. Usually, there is also a decrease in appetite and weight. You may feel more tired and fatigued than normal or may want to take more naps. Some people may also have fever or sinus congestion. In addition, you may be breathing faster than you usually do.

HOW IS IT DIAGNOSED?

The diagnosis of a pulmonary exacerbation is usually made by your CF doctor. You should call your our office immediately if you notice any of the above symptoms. To help determine if you are having a pulmonary exacerbation, we may ask that you come to clinic. In addition, your CF doctor may order a chest x-ray and lung function tests.

HOW IS IT TREATED?

A pulmonary exacerbation is usually treated with antibiotics that kill the bacteria in the lungs. You will also be asked to take more breathing treatments and do more airway clearance than normal. Depending on how severe the exacerbation is, you may be admitted to the hospital and receive intravenous (IV) antibiotics. In many cases you will be able to go home on IV antibiotics and continue to go to school and/or work. Usually, entire treatment is done for 2 to 3 weeks.