

+parents, kids, home



Meet Guest Columnist
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Pneumonia Know-How

What makes the elderly more susceptible to this lung infection and how to fend it off.

Pneumonia is an infection of the lungs caused by bacteria, virus, fungi or other germs. The infection causes inflammation of the alveoli (tiny air sacs in the lungs) that fill up with fluid, making it difficult for a person to breathe. Left untreated, it can lead to several complications.

In the elderly, these include bacteremia (an infection that spreads to the bloodstream and infects the organs), pleurisy (inflammation of the membrane that covers the lungs) and empyema (infection of the fluid-causing inflammation), lung abscess (pus-filled cavity in the infected lung area) and acute respiratory distress syndrome (ARDS) or respiratory failure, that can be potentially life-threatening.

Pneumonia in the elderly

Statistics reveal that over 800 million seniors (above age 65) globally are at risk of pneumonia. In fact, the elderly fall in the high-risk group. Reasons for this include a decreased immune response. It has been found in studies that the cells (the macrophages and B cells) which are responsible for immunity against infections are fewer in the elderly as compared to the young. Also, the fact that the elderly may already suffer from other health conditions lowers their ability to fight newer infections. Typically a senior with underlying problems like diabetes, heart disease, asthma, delirium and dementia are more at risk. Malnutrition associated with pneumonia is also very common among the elderly.

Symptoms to watch out for

The standard symptoms of pneumonia are cough, yellow or green sputum, shortness of breath, pain in the chest, fever,

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Prevention

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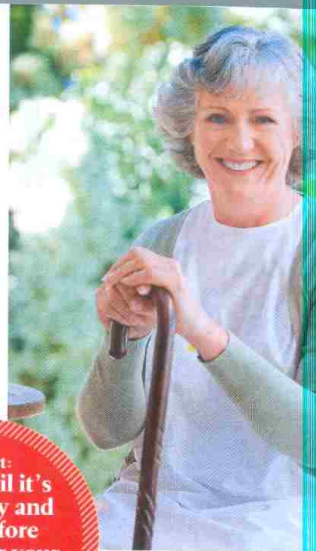
chills. However, in the elderly, pneumonia has a different clinical presentation. For one, fever and cough may be absent. Confusion and reduced functional physical capacity may sometimes be the only presenting features of pneumonia in this group. These may lead to a delay in diagnosis and treatment that in turn may contribute to the higher observed death rates among the elderly with pneumonia.

Get it diagnosed

A clinical examination is necessary. The doctor will listen to the patient's lungs—bubbling sounds (rales) and rattling sounds (rhonchus) signal infection and inflammation. A chest x-ray is the most definitive diagnostic tool that confirms the location and degree of infection. In addition, phlegm and blood test is required to isolate the causative germ. Sometimes, pulse oximetry test, which monitors the blood's oxygen levels, may be conducted.

Follow the treatment

A healthy diet, plenty of water and lots of rest are the pillars of treatment. Viral pneumonia usually runs its course (about five to seven days) without medication. Bacterial pneumonia is treated with antibiotics. It can take between 10 to 14 days to recover completely.



Be alert:
Wait until it's less foggy and cold before you go for your morning walk in winter.

Stay safe

■ Get vaccinated

Since the elderly have a weakened immune system, pneumococcal and influenza vaccines can help. Seniors above 65 should get one dose of the pneumococcal vaccine. The influenza vaccine should be taken annually.

■ Follow healthy habits

Exercise, eat healthy, get adequate sleep, wash hands frequently and avoid exposure to anyone suffering from cold and flu.

■ Avoid sudden exposure to cold

Keep yourself warm when you step out for your early morning walk; bathe in water that's at a comfortable temperature; cover yourself when you move from a warm room to a cooler one in winter. 