

TO STUDY THE CLINICAL, RADIOLOGICAL AND MICROBIOLOGICAL PROFILE OF PATIENTS WITH BRONCHIECTASIS IN A TERTIARY CARE HOSPITAL

INTRODUCTION:

Bronchiectasis has prevalence of 4.2 per 100000 persons. Patients are prone to recurrent LRTI & derailment of pulmonary functions which leads to poor QLI. It is considered more of an orphan disease without much research work. This study aims to bring out their clinical, radiological & microbiological features, their correlation with each other, for early disease identification, treatment and prevention of complications

AIM:

To study the:

Bronchiectasis patients' socio-demographic, clinical, radiological and microbiological profile.

Causative organism and its' radiological correlation/disease severity

MATERIALS AND METHODS:

Its' a cross sectional study with 165 patients for 6 months. History, clinical examination, symptom analysis, X-ray, HRCT chest, PFT (spirometry), ECHO, Sputum AFB, gram staining, culture & sensitivity done.

RESULTS:

78-males and 87 females.36.4% in age group of 40-50yrs and 33.7% in 50-60yrs.52% had cough with sputum, 23% with cough,49% with breathlessness. Etiology couldn't be identified in 39%, while 32.7% had prior ATT.45.5% had obstruction in PFT, while 38.8% was normal. Radiologically bilateral involvement was seen in 30% with cylindrical being common type in 58.8%. 42.7% had 2 lobe involvement and 1.8% had involvement of all lobes.22.4% had hemoptysis.PHT and corpulmonale seen in 10.3% & 9.7% respectively Pseudomonas and klebsiella were common organisms in 26% each, E.coli and H.influenza in 18.2% and 10.3% respectively. Increased number of lobes involvement and destructive cystic types had signification correlation with pseudomonas culture ($p<0.001$)

CONCLUSION:

Bronchiectasis is a progressive disease with increased morbidity and mortality. While **RADIOLOGY** plays an important role in diagnosis, **MICROBIOLOGY** plays an important role in treatment and preventing exacerbations/disease progression. Hence a multidisciplinary assessment is essential for wholesome management of the disease

Key words:

Bronchiectasis, pseudomonas, X-ray, HRCT, PFT, ECHO, cor pulmonale, PHT