

Chronic Respiratory Conditions – Possible Signs

NB: signs are on side of lesion unless otherwise stated

Pulmonary fibrosis

- Oxygen therapy
- Dry cough
- Tachypnoea
- Reduced expansion
- Fine end-inspiratory crepitations

Signs of aetiology: hand deformity (RA), clubbing (idiopathic pulmonary fibrosis), sclerodactyly/telangiectasia/microstomia (systemic sclerosis), butterfly rash (SLE), lupus pernio (sarcoid), radiation burns, kyphosis (ankylosing spondylitis)

Signs of complications: cushingoid/bruising (steroid use), loud P2/RV heave (pulmonary hypertension)

COPD

- Bedside inhalers/nebulisers
- Accessory muscle use
- Nicotine stains
- Tachypnoea
- Lip pursing
- Reduced cricosternal distance (<3 fingers)
- Tracheal tug
- Indrawing of lower intercostal muscles on inspiration
- Hyper-resonance (with obliterated cardiac and hepatic dullness)
- Quite breath sounds/wheeze/prolonged expiratory phase

Signs of complications: cushingoid/bruising (steroid use), loud P2/RV heave (pulmonary hypertension)

Pneumonectomy

- Unilateral chest flattening
- Thoracotomy scar
- Tracheal deviation (towards)
- Reduced expansion
- Dull percussion note
- Reduced breath sounds
- Bronchial breathing in upper zone (due to deviated trachea)

Signs of aetiology: cachexia/clubbed/nicotine stains (lung cancer), wet cough/clubbed/coarse crepitations (bronchiectasis), signs of COPD (bullectomy)

Lobectomy

- Thoracotomy scar only

Signs of aetiology: cachexia/clubbed/nicotine stains (lung cancer), wet cough/clubbed/coarse crepitations (bronchiectasis), signs of COPD (bullectomy)

Pleural effusion

- Reduced expansion
- Stony dull percussion note
- Reduced breath sounds
- Reduced tactile fremitus and vocal resonance

Signs of aetiology: hand deformity (RA), clubbing (mesothelioma/bronchogenic CA), butterfly rash (SLE), lymphadenopathy (malignancy), radiation marks, signs of chronic liver disease (cirrhosis), pulmonary/peripheral oedema (heart failure)

Bronchiectasis

- Productive cough
- Inspiratory clicks
- Clubbing
- Coarse, late expiratory crepitations

Signs of aetiology: young and thin (CF), curved yellow nails and lymphedema (yellow nail syndrome), lymphadenopathy (malignancy), dextrocardia (Kartagener's syndrome)

Kyphoscoliosis

- Increased thoracic forward curvature or lateral curvature of the spine
- Reduced spine flexion/extension
- Rib hump
- Reduced chest expansion

Lung cancer

- Cachexia
- Clubbing
- Nicotine stains
- Hard irregular lymphadenopathy
- Radiation burns

Signs of complications: pain and swelling of wrists (Hypertrophic pulmonary arthropathy), ptosis/meiosis/anhidrosis (Horner's syndrome)

Lung transplant

- Mid-sternotomy/thoracotomy scar

Signs of aetiology: signs of COPD, clubbing (CF/IPF)

Signs of complications: cushingoid/bruising (steroid use)

Examination findings in common respiratory conditions				
	Pneumothorax	Pneumonia	Pleural effusion	Collapse
Trachea displacement	Away	None	Away (if large)	Towards collapse
Expansion	All reduced ipsilaterally			
Percussion resonance	Increased	Decreased	'Stony-dull'	Decreased
Breath sounds	Reduced/absent	Bronchial breathing + coarse crepitations	Reduced/absent	Reduced/absent



Peripheral cyanosis



Nail clubbing



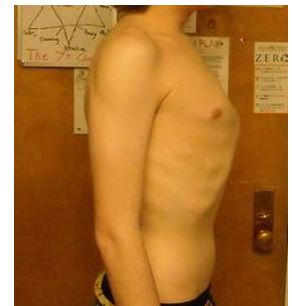
Pectus excavatum:
sunken chest. May be congenital or develop at puberty



Tar staining



Horner's syndrome: ptosis, miosis, anhidrosis
Nautiyal A, Singh S, DiSalle M, O'Sullivan J (2005) Painful Horner Syndrome as a Harbinger of Silent Carotid Dissection. *PLoS Med* 2(1): e19 doi:10.1371/journal.pmed.0020019



Pectus carinatum:
protrusion of sternum. May be congenital, post-surgical or develop at puberty