

## Patient information

### Pneumonia

LUHFT Respiratory Medicine Department

#### What is pneumonia and how is pneumonia diagnosed?

Pneumonia refers to a condition where the lung itself is inflamed and this is commonly due to an infection.

A doctor can diagnose pneumonia based on your symptoms and by checking your chest. You may need a chest X-ray, blood tests, and/or phlegm tests to confirm that you have pneumonia.

If you also have COVID-19 symptoms (cough, viral symptoms, loss of sense of smell), your doctor may ask you to do a COVID test. This will help find out whether the pneumonia is caused by bacteria or by Coronavirus.

#### How is pneumonia treated?

It is important to receive treatment quickly as pneumonia can be very serious. The main treatment for bacterial pneumonia is antibiotics. You should also **rest** and **drink plenty of water**.

If you're diagnosed with bacterial pneumonia, your doctor should give you antibiotics to take within four hours.

If you have been diagnosed with pneumonia and you have chest pain, you can take painkillers such as paracetamol or ibuprofen (unless you have a reason not to take ibuprofen which can be checked against NHS guidance or with your GP).

#### Mild bacterial pneumonia

If you have mild bacterial pneumonia, you may be able to manage it at home with treatment from your GP. If you do not start to feel better after three days, tell your GP – you may need to try a different type of antibiotic.

It's important that you **finish the course of antibiotics even if you start to feel better**. If you do not finish the full course, some bacteria might not be fully treated, the pneumonia could worsen, or you could develop resistance to antibiotics, making it harder to treat infections.

## More severe bacterial pneumonia

Some people are too ill to be treated at home and need to go to hospital, as determined by their GP. If you're too ill to drink and take tablets, you can have fluids and antibiotics through a drip in your arm. Hospital care allows for close monitoring and further treatments as needed.

## Viral pneumonia and COVID-19 pneumonia

Most viral pneumonia goes away by itself. You should rest and drink a lot of water, and you can take painkillers if you are in pain. In some cases, your doctor will prescribe antiviral medicine.

If the pneumonia is very bad you may have to be admitted to hospital for treatment such as oxygen or medications to help your breathing.

## Aspiration pneumonia

Aspiration pneumonia results from the inhalation of foreign objects, saliva/secretions, or food particles. This typically requires treatment with antibiotics. If there is inhalation of food products, you may need to have further investigation into swallowing function. If your pneumonia is caused by an object you've inhaled, you may require a bronchoscopy (camera test) to look into your lungs.

## Complications caused by pneumonia

**Pneumonia can sometimes cause other complications. These include:**

- **Respiratory Failure** – this is when your lungs cannot get enough oxygen into your blood. It may mean that you need support with a breathing machine as well as oxygen. Acute respiratory distress syndrome (ARDS) is a life-threatening form of respiratory failure that can occur when your lungs become very inflamed.
- **Pleurisy**– this is when the pleura, the thin linings between your lungs and ribcage, become inflamed, leading to chest pain.
- **Pleural effusion (fluid around the lungs)** – some patients in hospital with bacterial pneumonia develop fluid around the lung(s). In most cases, this will not require extra treatment. Certain cases may need further treatments such as drainage or longer courses of antibiotics. This will be discussed with you as needed. In very rare cases, a surgery may be required for an infected pleural effusion (empyema).
- **Lung Abscess** - a rare complication, mostly seen in people with a serious pre-existing illness or history of alcohol misuse. An abscess may need treatment with different antibiotics, and it will usually take several months to recover.
- **Sepsis**– a life-threatening reaction to an infection. Sepsis needs treatment in hospital immediately because it can get worse quickly.
- **Potential Long-term complications** can include **scarring** of the lungs which can become permanent, (if this occurs, support can be provided) and **bronchiectasis**, especially if you have had this in childhood.

## Recovering from pneumonia

Most people make a full recovery from pneumonia. It's impossible to say exactly how quickly you'll recover, but this table gives a general guide:

One week	Your fever should be gone
Four weeks	Your chest should feel better and you should produce less mucus
Six weeks	You should cough less and find it easier to breathe
Three months	Most of your symptoms should be gone, though you may still feel tired
Six months	Most people will feel back to normal – but for some it will take longer

### Tips for recovery:

- Drink plenty of fluids and get a lot of rest while you're recovering.
- While you're resting in bed, turn over at least every hour while you're awake. Breathe deeply five to ten times and then cough or huff strongly. This will help to clear any phlegm in your lungs.
- If you smoke, it's important to stop. If you continue smoking, it will probably take longer for you to recover, and you're more likely to get pneumonia again.
- Short walks every day can help speed up your recovery. If you feel chest pain, shortness of breath or dizziness when you try to exercise, stop for the day. If the symptoms continue, contact your GP or call **111**. If you or someone you know is struggling to breathe or has collapsed, **call 999**.

If the pneumonia symptoms continue, your doctor may organise another chest X-ray. Certain high risk patient groups will be asked to have another X-ray after six weeks, particularly if you smoke or are over 50. This is to make sure the infection has gone and there are not any other problems with your lungs.

## Recovering from COVID-19 pneumonia

Often people with COVID-19 pneumonia are ill for longer than people with bacterial pneumonia or other kinds of viral pneumonia, especially if the pneumonia is severe or if you're elderly. This is because the virus affects many small areas of the lung, as well as other organs.

If you have severe COVID-19 pneumonia and you have to go into intensive care, you'll have a follow-up consultation after being discharged from hospital, to make sure your recovery is going well..

COVID-19 pneumonia can cause long-term lung problems, including scarring of the lungs, especially if the pneumonia is severe.

### More help and support

For more advice about pneumonia call the Asthma and Lung UK Helpline on **0300 222 5800, 9am-5pm, Mon-Fri** (excluding Bank Holidays). Their friendly team can help answer your questions or worries. Email: [helpline@asthmaandlung.org.uk](mailto:helpline@asthmaandlung.org.uk) / WhatsApp helpline (asthma): 07999 377775.

## **Feedback**

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

## **Further Information**

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