



History of pleural effusion

Color index :

Important

Further explanation

[Editing link](#)

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Pleural effusion

- ★ A collection of **fluid** in the pleural space.
- ★ Caused by one of the following mechanisms:
 - Increased drainage of fluid into pleural space
 - Increased production of fluid by cells in the pleural space
 - Decreased drainage of fluid from the pleural space
- ★ Symptoms : often asymptomatic . dyspnea on exertion , peripheral edema ,Orthopnea, PND *
- ★ Signs : Stony dullness to percussion ,decreased breath sounds over the effusion , decreased tactile fremitus , Reduced chest expansion on the affected side trachea and apex beat displaced away

Pleural Effusion could be :

Transudative effusions :

- ★ Caused due to either elevated capillary pressure in visceral or parienteral pleura (CHF), or decreased plasma oncotic pressure (hypoalbuminemia)
- ★ Bilateral effusions, protein content of less than 30 g/L
- ★ Causes : Hypothyroidism , CHF , Nephrotic Syndrome , Chronic Liver disease ,Pulmonary embolism , Peritoneal dialysis and Atelectasis
- ★ Rx : Diuretics and sodium restriction and Therapeutic thoracentesis

Exudative effusions :

- ★ Caused due to either Increased permeability of pleural surfaces Or Decreased lymphatic flow from pleural surface because of damage to pleural membranes or vasculature
- ★ Unilateral effusions, protein content of greater than 30 g/L
- ★ Causes : Bacterial pneumonia , (TB) Malignancy,Viral infection , PE, Collagen vascular diseases
- ★ Rx : treat underlying disease

Light's criteria :

Exudative effusions have at least one of the following:

- ★ Protein (pleural)/protein (serum) >0.5
- ★ LDH (pleural)/LDH (serum) >0.6
- ★ LDH > two-thirds the upper limit of normal serum LDH

Chief complaint
 “ Shortness of breath and chest discomfort “

History of presenting illness

<p>How it started, sudden or gradual?). Did it come on very quickly? Or instantaneously?</p>	
<p>How long have you been short of breath?</p>	<p>Hour to days : pleural effusion</p>
<p>Do you have chest pain?</p>	<ul style="list-style-type: none"> ★ MI ★ PE ★ Pericarditis
<p>Is your chest tight, or does it take an increased amount of effort to breathe?</p>	<ul style="list-style-type: none"> ★ Asthma ★ Ischemic heart disease
<p>Become worse with time?</p>	<p>Worsen progressively : pulmonary fibrosis , Interstitial lung disease.</p>
<p>How much exercise can you do before your SOB stops you or slow you down?</p>	<p>NYHA classification:</p> <ul style="list-style-type: none"> ★ <input type="checkbox"/> Class I: on heavy exertion ★ <input type="checkbox"/> Class II: on moderate exertion ★ <input type="checkbox"/> Class III: on minimal exertion ★ <input type="checkbox"/> Class IV: at rest
<p>Is the SOB contentious throughout the day, intermittent?</p>	<p>If intermittent When is it worse/better?</p>
<p>Does your breathing only get heavy with activity?</p>	<ul style="list-style-type: none"> ★ Anemia ★ Pulmonary disease
<p>Do you feel as if your throat is closing or that air can't get all of the way into your lungs?</p>	<p>Panic disorder</p>
<p>Do you have any itching or hives? Are your lips or tongue swelling?</p>	<p>Anaphylaxis</p>
<p>Do you have Fever</p>	<ul style="list-style-type: none"> ★ Pneumonia (Acute or chronic) ★ PE ★ Inflammatory interstitial lung disease
<p>Do you have cough</p>	<ul style="list-style-type: none"> ★ Asthma: nonproductive cough ★ Acute pneumonia ★ Aspiration ★ GERD ★ PE: nonproductive cough with occasional scant hemoptysis ★ pulmonary edema: cough with pink frothy sputum ★ chronic bronchitis: 3 months of productive cough per year for 2 consecutive years ★ Interstitial lung disease

Do you have hemoptysis ? Weight loss ?	Lung cancer
Orthopnea, paroxysmal nocturnal dyspnoea or peripheral oedema?	Heart failure
leg swelling ? Frothy urine ?	Nephrotic syndrome
Do you have shortness of breath when lying flat?	CHF.
Does lying on one side or the other cause increasing SOB?	Unilateral pleural effusion Chronic heart failure
Constitutional symptoms	Fever, weight loss, loss of appetite, night sweat ?

Risk factors

- ★ Heart failure?
- ★ Pneumonia?
- ★ Nephrotic syndrome?
- ★ Lung cancer?

Past Medical History

Drug History

Bronchodilators , Steroids , Home oxygen , oral contraceptive Cytotoxic agent
ACE inhibitor , β blockers , NSAID

Family History

Social History

- ★ Smoking history?
- ★ Occupational history (any asbestos exposure)?

Done by;
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