Bronchiectasis
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Bronchiectasis (the persistent abnormal dilation of the bronchi) is the result of inflammatory damage due to respiratory infection, aspiration of material, etc. Vocational handicaps may develop when the patient is advised to avoid noxious fumes, dusts, etc.

This disease process is characterized by an abnormal and persistent dilation of the bronchi or the large passages which convey air to and within the lungs. The disease typically results from inflammatory damage to the bronchial walls. This inflammation may have resulted from persistent respiratory infections resulting in obstruction of these bronchial tubes, aspiration of foreign material, pressure secondary to tumors, enlarged lymph nodes or dilated blood vessels. Some hereditary factors may result in a pre-disposition to bronchiectasis.

The disease process is manifested in a chronic cough and the production of significant amounts of purulent sputum. Additional symptoms may include clubbing of the fingers, repeated episodes of pulmonary infection and blood-stained sputum. Medical management includes the immediate treatment of respiratory infections, removal of bronchial secretions and appropriate patient-family education programs may be necessary to include prolonged antibiotic therapy. In the instance of patient education, postural drainage exercises are usually provided and the patient is strongly advised to avoid noxious fumes, odors, dust, poor ventilation and most importantly cigarette smoking.

**Duration of Disability**

In the case of bronchiectasis treated without surgery, acute conditions generally will involve a period of total disability ranging from two to six weeks with partial disability following more than a period of one to two weeks. Average treatment time to maximum medical improvement is one to two months. In the case of surgical intervention six to 12 weeks of total disability followed by two to four weeks of partial disability is common with maximum medical improvement generally being reached within two to four months post-surgery. (See Chart 3 – provided in a later reading assignment – The
Vocational Handicaps and Rehabilitation

Vocational implications are essentially consistent with those described under Class 1 through 4 respiratory impairments (see Table 3 – provided in an earlier reading assignment – Chronic Obstructive Pulmonary Disease; and Chart 2 – provided in a later reading assignment – The Assessment of Damages).

Vocational rehabilitation duration will generally vary depending upon the severity of the condition. Those able to return to similar work generally will find six to 12 weeks sufficient, including job placement. Twelve to 26 weeks is required for more severe cases or for those who must change jobs to alternatives consistent with related worker trait groups. Those requiring a full change in career direction and formal retraining will be followed for 12 to 18 months. (For more information with respect to cost of vocational rehabilitation, see Chart 4 – provided in a later reading assignment – The Assessment of Damages.)