Understanding Pleurisy

The pleura are membranes that cover the lungs and the inside of the chest. They create a smooth surface as your muscles and organs move on during breathing.

When the pleura become irritated or swollen, the condition is called pleurisy. Sometimes - but not always - fluid can collect between the pleura. This is called pleural effusion. (When there is no fluid, the condition is called dry pleurisy.)

Symptoms

Usually the first sign of pleurisy is a distinctive chest pain that starts suddenly. The pain can vary from vague discomfort to an intense stabbing pain. Sometimes it is felt only while breathing deeply or coughing, or it can cause continuous pain that gets worse with deep breathing or coughing. Usually the pain is felt in the chest wall over the location of the inflammation, but it may also be felt in the upper abdominal area or in the neck and shoulder or in a combination of these areas.

Because inhaling deeply hurts, a person with pleurisy tends to breathe rapidly and shallowly. On the side where the pain is, the muscles of the chest move less than those on the other side. If fluid builds up between the layers of the pleura, the chest pain may go away. Large quantities of fluid can make expanding one or both lungs difficult.

Causes and Risk Factors

Irritation of the pleura can be cause by:

- A virus
- Bacteria
- Cancer
- Inhaling asbestos
- The use of certain drugs, such as nitrofurantoin
- Some types of autoimmune diseases, such as lupus

Diagnosis

To diagnose pleurisy, a physician performs a physical examination and asks about the symptoms being experienced. Because the pain associated with pleurisy is distinctive, it is often easy for a doctor to make a diagnosis. Using a stethoscope on a patient with pleurisy, a squeaky, rubbing sound may be heard. Because the pleura are soft tissues, they do not make a shadow on an X-ray, but a buildup of fluid between the pleura may show up on an X-ray.
Treatment

How pleurisy is treated depends on what has caused it. Antibiotics may be prescribed for infections caused by bacteria. If a virus causes the pleurisy, no treatment will be given. If the cause is lupus or an autoimmune disease, corticosteroids often quickly cure the pleurisy.

Nonsteroidal anti-inflammatory drugs, such as aspirin or ibuprofen, help relieve the chest pain. Codeine and other stronger pain relievers are not advised because they tend to prevent coughing, which is important to keep the lungs from collapsing and developing pneumonia. Holding a pillow against the part of the chest that hurts while coughing or breathing deeply can be helpful. Wrapping the chest in wide, elastic bandages can help relieve severe pain, but this makes moving the chest during breathing more difficult and increases the risk of a collapsed lung or pneumonia.

Contact Us
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