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Clinical outcome in relation to care of a multidisciplinary non-cystic fibrosis bronchiectasis outpatient clinic

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Background & Aim: Non-Cystic Fibrosis Bronchiectasis (NCFB) is a complex inflammatory airway disease with structural airway damage, significant morbidity and mortality. The evidence of improved clinical outcome from managing patients with CF at specialist center is well-established. However, the role of specialist clinic in managing NCFB patients has not been well-reported from Asia. We aim to evaluate the clinical outcome of managing patients with NCFB at a multidisciplinary Specialist Outpatient Clinic (NCFBSOC).

Methods: Patients from NCFBSOC were divided into two periods. Period A was 12 months before attending the NCFBSOC and patients were managed by a non-bronchiectasis specialist. Period B was 12 months after attending the NCFBSOB and managed by a bronchiectasis specialist, respiratory physiotherapist and 2 respiratory nurses. We performed a comparison analysis on predicted Forced Expiratory Volume in one second (FEV1), Body Mass Index (BMI), hospital admissions and Emergency Department (ED) attendances due to bronchiectasis exacerbation between Period A and B.

Results: We studied 74 patients (29 male) with a mean (SD) age of 68 (12). The mean (SD) rate of ED attendances due to bronchiectasis exacerbation was significantly reduced from Period A to B (0.3 (0.6) vs. 0.1 (0.3), p=0.01). The mean (SD) rate of the hospital admission was also significantly reduced (1 (1.2) vs. 0.5 (0.9), p=0.01). The BMI and percent predicted FEV1 were stable after attending the NCFB for 12 months ((20 vs. 20) and (65% vs. 67%) respectively).

Conclusion: This study demonstrates that managing patients at a NCFBSOB results in a reduction in the rate of ED attendances and hospitalizations.

Biography

Tan Ee Chen Jaclyn has completed his Graduation from University College London in MSc with merit in Advanced Physiotherapy (Cardiorespiratory). She has 8 years of experience in Healthcare as a Critical Care Physiotherapist and Clinical Educator. She has a great interest in the management of patients with respiratory diseases and is the forerunner in pushing for early mobilization for the critically ill patients in the medical intensive unit care. She is also involved in the development of the bronchiectasis care path in the hospital. She has presented multiple posters and abstracts at both local and overseas conferences and won awards for some of these posters.

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