



Interstitial lung disease (ILD) refers to a group of diseases affecting the tissue and space around the air sacs of the lungs. Most of these diseases cause progressive scarring in this tissue. Once lung scarring occurs, it is generally irreversible. Medications may slow the damage of interstitial lung disease, but many people never regain full use of their lungs. Interstitial lung disease can be caused by long-term exposure to hazardous materials, such as asbestos. Some types of autoimmune diseases, such as rheumatoid arthritis, also can cause interstitial lung disease. In most cases, however, the causes remain unknown.

IPF: Are you monitoring your symptoms?

What to do if you have IPF and experience an exacerbation / flare up?

Unfortunately IPF is a slowly progressive condition. However, at times you may have a rapid worsening of symptoms such as cough and breathlessness. An exacerbation of your symptoms can be triggered by an infection or it may be a flare up of the inflammatory process. So, it is important to be aware of what is 'normal' for you and recognize changes in your symptoms.

What are flare up symptoms?:

During a flare up you may notice a dramatic increase in:

- how breathless you are
- how often you cough
- how much phlegm you produce

In these circumstances it is important to seek medical attention promptly.

You may also want to give your respirologist a call.

You may be treated with a combination of antibiotics and steroids.

Intravenous drugs and oxygen therapy may be necessary.

You may need to be treated in hospital to get your condition stabilized.

ILD TEAM MEMBERS



Dr. Ambrose Lau completed medical school at the University of Western Ontario in 2005. He completed his Internal Medicine training through the University of British Columbia in 2008, and a Respirology Fellowship at the University of Toronto in 2010. He recently completed a Master of Education degree through the University of Toronto: Ontario Institute for Studies in Education. He is a staff physician at St. Michael's Hospital, Toronto Western Hospital and also practices General Respirology in the community in the north end of the city. Dr. Lau was a pioneer in the development of a dedicated TB Elective for Respirology Fellows at the University of Toronto. His interests focus on teaching, occupational lung disease, tuberculosis, and ILD.

Follow this link to learn more about the ILD clinic at TGH and to read previous newsletters:
http://www.uhn.ca/MCC/PatientsFamilies/Clinics_Tests/Interstitial_LungDisease_Clinic

Traveling over the Holidays?

ONLINE RESOURCES:

Canadian Pulmonary Fibrosis

Foundation:

<http://www.canadianpulmonaryfibrosis.ca/>

Twitter: @THE_CPFF

Facebook:

Canadian Pulmonary Fibrosis Foundation: Non-Profit Organization

Pulmonary Fibrosis Foundation:

<http://www.pulmonaryfibrosis.org/home>

Twitter: @PFFORG

Facebook: **Pulmonary Fibrosis Foundation: Charity Organization**

Scleroderma Foundation:

www.scleroderma.org

SUPPORT GROUP

MEETING INFORMATION:

When: Wednesday, Jan. 27, 2015

Where: Toronto General Hospital

1st Floor Eaton South Building
(Elizabeth Street Entrance)

Conference Room 450a

Time: 12:30-2:00pm

For Who?: ILD patients and caregivers

Speaker: Dr. Adrienne Tan

TOPIC: Pulmonary Fibrosis and Mental Health

Please RSVP to:

mandy.ettinger@uhn.ca

Travelling / Flying advice:

You will need medical clearance to fly if either of the following criteria applies to you:

- Your fitness is in doubt as a result of a recent illness, a period in hospital, surgery or you have a condition that is unstable
- You need any special service, e.g. oxygen

If either of the above criteria applies, you and your doctor will need to complete a Medical Information Form, which is available from the medical department of the airline or your travel agent.

Can I fly? There is slightly less oxygen in an aircraft cabin than at ground or sea level. If you already have low blood-oxygen levels because of your chest condition this could cause breathlessness and discomfort. In this case your doctor might suggest having some further tests to predict if this is likely to be a problem for you. (This effect can also happen in high-altitude destinations from 6,000ft upwards). However, most people with chest complaints have no difficulty flying. If you can walk more than 50 meters on the flat without getting breathless you should be able to fly, as long as you have your doctor's permission.

Plan ahead:

- You should arrive in plenty of time to avoid rushing.
- Avoid carrying heavy luggage.
- You can obtain wheelchair transportation within the airport if you arrange it in advance.
- Make sure you have all your medication in your hand luggage. This ensures you have a supply in the event of missing luggage, delays, etc. You may wish to bring a supply of antibiotics with you in the event of developing a chest infection while you are abroad.
- Have a letter from your doctor to keep in your hand luggage with details about your condition and medication.
- If you have any concerns about your comfort or condition when flying you should contact the airline's medical department before travelling by air. This will allow the airline staff to help you with early boarding and ensure that you get the best in-flight care.

How do I arrange oxygen for a flight? If you use oxygen continuously you will need it during the flight. You will have to let the airline know your requirements before you book to ensure your needs can be met. The airline will only provide an oxygen mask so if you prefer nasal cannula you will need to provide your own. Most airlines will charge you for your oxygen and will only provide oxygen for the actual flight. If you need oxygen on the ground you will need to provide your own for any transfer between flights.

