A Simple Guide To Hemoptysis (Blood in Sputum) Diagnosis, Treatment And Related Conditions (A Simple Guide to Medical Conditions)

A SIMPLE GUIDE TO
HEMOPTYSIS,
(Blood in Sputum)
Diagnosis, Treatment
And
Related Conditions
by

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Chapter 1 Hemoptysis (Coughing up blood) What is Hemoptysis? Hemoptysis is the medical symptom of coughing up of blood or bloody mucus from the lungs and windpipe. Hemoptysis is the medical term for coughing up blood originating from the respiratory tract below the level of the larynx. Hemoptysis is not the same as bleeding from the mouth, throat, or gastrointestinal tract. Blood that coming from a cough often looks foamy because it is mixed with air and mucus. It is normally bright red even though it may be rust-colored. Sometimes the sputum may only contain streaks of blood. Any amount of blood in the sputum more than 600ml is regarded as massive hemoptysis and requires emergency medical treatment. Hemoptysis should be differentiated from: 1. Hematemesis - vomiting of blood from the gastrointestinal (GI) tract. Pseudohemoptysis - where a cough reflex is stimulated by blood not derived from the lungs or bronchial tubes. This may be from the oral cavity or nasopharynx (e.g., after an epistaxis) or after aspiration of hematemesis into the lungs. The classifications of severity differ. Even though volumes of 100 to 1000 mL of blood have been described as indicative of massive hemoptysis, no specific volume has been totally accepted. A large volume of expectorated blood alone should not define massive hemoptysis, but rather an amount of blood sufficient to cause a condition that threatens the patients life is normally a more correct and functional definition of severe hemoptysis What are the Causes of Hemoptysis? Hemoptysis is the symptom of coughing up blood or phlegm blood-streaked originating in the respiratory tract. The bloody substances may appear bright red or may look frothy because it is mixed with air from the lungs. The amount of blood expelled may be related to the severity of the underlying condition. The source of

hemoptysis may be bleeding in the lung circulation system (pulmonary vessels or bronchial vessels) or the tissue (granular). Inflammatory conditions of the airways (bronchitis, bronchiectasis, laryngitis) are responsible for about 80% to 90% of hemoptysis cases. Primary tumors (especially carcinoma) of the lung are responsible for about 20% of cases. These tumors are most frequent in patients over 40 years old who are smokers. The lung cancers that have spread from other primary sites (metastatic lung cancers) rarely cause hemoptysis Pathophysiology Depending on the underlying disorder, hemoptysis is a result of several different pathologic mechanisms. The lung contains two separate vascular systems: 1. The pulmonary and 2. The bronchial vessels. Hemoptysis can happen with involvement of either. 1. Infarction of lung tissue with hemoptysis can happen in numerous disorders. Pulmonary emboli often present with hemoptysis due to ischemic pulmonary parenchymal necrosis.

The same ischemic necrosis can be seen in all idiopathic vasculitides affecting the pulmonary vessels, such as Wegeners granulomatosis. 2. Infections producing blood vessel invasion with infarction are primarily: a. Staphylococcus aureus, b. Pseudomonas aeruginosa, c. Aspergillus fumigatus, d. The phycomycetes. Vascular dilatation with erosion is another mechanism of hemoptysis. This happens within the bronchial capillaries in the mucosa of the tracheobronchial tree due to: 1. Acute infection such as viral or bacterial bronchitis, 2. Chronic infection such as: a. Bronchiectasis b. Exposure to toxins such as cigarette smoke. 3. The shearing force of coughing can result in bleeding. Local hyperemia is seen in the common bacterial pneumonias such as Streptococcus pneumonia. TABLE OF CONTENT Introduction Chapter 1 Hemoptysis (Blood in Sputum) Chapter 2 Causes Chapter 3 Symptoms Chapter 4 Diagnosis Chapter 5 Treatment Chapter 6 Prognosis Chapter 7 Tuberculosis Chapter

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