



Conditions Associated with IPF

Patients with IPF often experience symptoms related to conditions that are commonly associated with the disease. Gastroesophageal reflux disease (GERD), pulmonary arterial hypertension (PAH), depression, and sleep apnea are among the most common conditions associated with IPF. Recognizing the symptoms associated with these conditions and reporting any new or worsening symptoms will help your doctor to identify the cause and develop an appropriate treatment plan.

GERD

GERD comes from poor functioning of the muscle that keeps the contents of the stomach from backing up into the esophagus, the tube that carries food from the mouth to the stomach. Some causes of GERD are being overweight, a hiatal hernia, and lying down too soon after a meal. Certain foods, such as fat, sugar, chocolate, onions, spicy or acidic foods, coffee, and alcohol can make GERD worse. If you experience symptoms, such as acid or sour taste in the mouth, belching, and a bloated stomach several times a week or at night, you should consult your doctor.

Diagnosis of GERD can usually be done without a procedure, but sometimes an X-ray or a minimally invasive diagnostic test may be required. Eating light meals, avoiding foods such as those mentioned above, adjusting your sleeping position, and losing weight (if you are overweight or obese) can be helpful for managing GERD. Your doctor may also suggest medication that will help.

GERD occurs at a higher frequency in patients with IPF, especially in patients more than 60 years old. Though a cause-and-effect relationship is not clear, managing GERD may help with your pulmonary health by reducing coughing.

PULMONARY ARTERIAL HYPERTENSION

If the pressure in the vessels bringing blood from your heart to your lungs is elevated, it is called pulmonary arterial hypertension (PAH). Common signs of PAH are fatigue, fainting, chest pain, and shortness of breath with activity. Your doctor may perform some tests, such as a lung diffusing capacity and 6-minute walk test. If they are impaired, you are at high risk for having PAH. The definitive way to confirm PAH is with a procedure called right heart catheterization. A small tube is inserted through a blood vessel and the blood pressure is measured directly.

A variety of conditions, such as emphysema, chronic bronchitis, congestive heart failure, defects of the heart, and others can cause PAH, but sometimes the cause is unknown.

DEPRESSION

IPF is a serious disease and some affected individuals have difficulty maintaining a positive attitude. If your doctor does not discuss your emotional well-being with you, you should raise the topic. Even patients with mild depression can be helped by therapy. Some doctors will be able to help you directly and some will refer you to a specialist, depending on their experience and the severity of your depression. More information about signs and symptoms, support groups, and mental health resources can be found in the PILOT™ Patient Counseling Tool “Emotional Well-Being.”



In addition to your physical challenges, keeping a healthy positive attitude is often difficult for patients with chronic lung disease. This poses special problems for patients and caregivers. For more information please see the PILOT™ Patient Counseling Tool “Emotional Well-Being.”

SLEEP APNEA

Some IPF patients suffer from obstructive sleep apnea (OSA). This condition occurs during sleep when the soft tissue at the back of the throat collapses and blocks the flow of air to the lungs. Breathing stops for a few moments until the lack of oxygen causes the lungs to take in air. OSA is usually accompanied by snoring, and is characterized by daytime sleepiness and 5 or more episodes of apnea or hypopnea (a milder form of apnea) per sleeping hour.

Obesity is an important risk factor for OSA, and a recent publication has shown a relationship between pulmonary function test impairment and sleep-related breathing disorders. The most common treatment for OSA is a positive airway pressure device.

MEDICATION-RELATED CONDITIONS

The medication(s) prescribed for your illness may have side effects which your doctor should discuss with you.

CONCLUSION

The conditions discussed in this PILOT™ Patient Tool are of particular concern to patients with IPF. Your doctor will be able to help you recognize the conditions and work with you to optimize your health.

ADDITIONAL RESOURCES

Emotional Well-Being

http://www.pilotforipf.org/resources/PtCounseling_01.pdf

Peer-to-Peer dialogue (IPF expert panel discussion)

http://www.pilotforipf.org/peer_dialogue.php#