Success Stories
Southeastern Med Pulmonary Rehabilitation provides new hope for respiratory disease sufferer

When Sheila Feldner, 57, of Byesville, arrived at Southeastern Med in August of 2010, she was breathing like a fish out of water, and was immediately admitted for further testing.

After a series of breathing assessments and evaluations, Eyad Mahayri, MD, FCCP, Pulmonary and Critical Care physician at Southeastern Med, diagnosed Sheila with Chronic Obstructive Pulmonary Disease (COPD) with only 18 percent lung capacity. “Before that day, I had noticed a slight shortness of breath when I would do ordinary things, like run the vacuum cleaner, but I just assumed I was out of shape,” she said. “I had quit smoking more than 20 year ago, so it never crossed my mind that it could be from smoking. But the 20 years prior that I spent smoking finally caught up to me.”

COPD is a progressive lung disease that makes it hard to breathe and is caused by damage to the lungs over many years, usually from smoking. Over time, breathing tobacco smoke irritates the airways and destroys the stretchy fibers in the lungs. Other risk factors include breathing secondhand smoke, chemical fumes, dust, or air pollution over a long period of time. The main symptoms of COPD include:
• A chronic cough;
• Mucus that comes up when you cough; and
• Shortness of breath.

As COPD worsens, shortness of breath becomes more common while doing even simple tasks like getting dressed or fixing a meal. It also gets harder to eat or exercise, and breathing takes much more energy. People often lose weight and become weaker.

“After the initial diagnosis, Dr. Mahayri sat down with me to explain the disease and my treatment options,” Sheila said. “He referred me to two places. One was the Cleveland Clinic to discuss a possible lung transplant, and the other was the Pulmonary Rehabilitation Program at Southeastern Med. For both of those, I am grateful.”

The Pulmonary Rehabilitation Program at Southeastern Med provides patients with chronic lung disease, such as emphysema, chronic bronchitis and asthma, with education, emotional support, exercise and breathing retraining. Sheila has completed the Pulmonary Rehabilitation Program and now participates in an independent disease management exercise program at the medical center. She is also currently in the process of completing the pre-transplant evaluation at the Cleveland Clinic. Once completed, she will be placed on the donor list with a score based on her immediate level of need and then a matching donor must be found.

For those who are living with a chronic pulmonary disease or preparing for or recovering from a lung transplant, the benefits of pulmonary rehabilitation are numerous. Pulmonary rehabilitation restores the highest possible level of independent function. It relieves breathing difficulty and fatigue, improves exercise or walking capacity, and provides patients more control on their illness. It also enhances patients’ sense of well-being and quality of life.

“When your ability to breathe is severely compromised, life changes dramatically. I try to stay positive by focusing on the small things in life. I am determined to see my grandchildren grow into adults and have children. I want and need to be here for my family.”

Kim Ott, RRT, Respiratory Therapist at Southeastern Med, monitors Sheila Feldner during an afternoon workout.
Pulmonary Care | How We Compare

Pulmonary care is the key to maintaining the energy that keeps us living. The lungs provide the oxygen carried throughout our bodies. Oxygen is what energizes every cell of the body and keeps us active. A shortage of oxygen affects every organ in the body. That is why at SEM we understand the importance of keeping the lungs functioning to their greatest capacity. We track specific measures to monitor the quality of our care and then compare them to national and state benchmark measures.

1. Pneumonia is caused by a viral or bacterial infection that fills your lungs with mucus. This lowers the oxygen level in your blood. A pneumonia shot can help prevent or lower the risks of complications of pneumonia. Patients with pneumonia should be asked if they have had the shot, if not, they should be given the pneumonia shot before being discharged from the hospital.

2. Different types of bacteria can cause pneumonia. A blood culture is a lab test to check what bacteria or other germs are in a blood sample. The blood culture tells what kind of medicine will work the best to treat your pneumonia. It is important for the accuracy of the test that the blood culture is done before any antibiotics are given to you.

3. Antibiotics are given to treat pneumonia caused by bacteria. Early treatment with antibiotics can cure pneumonia and decrease the possibility of complications. Patients who receive their first dose of an antibiotic within 6 hours of arrival to the hospital have better outcomes.

4. Pneumonia is a common complication of mechanical ventilation. Between 10 percent and 20 percent of patients who are on a ventilator develop pneumonia. There are a group of interventions called a bundle related to this disease process. These interventions include raising the head of the bed up, daily assessing the readiness of the patient to come off the ventilator, preventing a stomach ulcer, and preventing blood clots. When these bundled interventions are done together the result is a better outcome for the patient.

Patient Makes Great Stride Thanks to Pulmonary Rehab

The Pulmonary Rehabilitation Program at Southeastern Med aspires to improve the health and functional status of patients who live with chronic respiratory disorders.

Butler Justice, of Senecaville Lake, began pulmonary rehabilitation at Southeastern Med in February of 2009 with the goal to feel better and become more active. While hospitalized after heart surgery in September of 2008, Butler was diagnosed with chronic obstructive pulmonary disease (COPD), which refers to chronic bronchitis and emphysema, a pair of commonly co-existing diseases of the lungs in which the airways become narrowed.

"I was constantly out of breath and could barely do 5 minutes on any exercise machine when I first started rehab," Butler said. "But now, I am able to do between 50-60 minutes on any machine."

Butler Justice, center, with Pulmonary Rehabilitation staff members Kim Orr, RRT, and Michelle Carter, EP

The Pulmonary Rehabilitation Program is for patients with chronic lung disease, such as emphysema, chronic bronchitis and asthma. It includes education, emotional support, exercise and breathing retraining, and it’s a safe, rewarding way to help those with a chronic lung disease:

• Reduce shortness of breath;
• Increase exercise tolerance and ability to perform normal daily activities;
• Increase understanding of their particular lung disorder;
• Use proper breathing techniques;
• Reduce the possibility of hospitalizations; and
• Increase self-reliance and independence.

The primary goal of pulmonary rehabilitation is to improve the quality of each patient’s life. “I am very grateful to the pulmonary rehab group at Southeastern Med,” Butler said. “Daily tasks that had become difficult for me to handle on my own are now more manageable. I am able to mow my own lawn again, tend my garden and go fishing everyday. It doesn’t matter how down you may feel one day. The pulmonary group will cheer you right up and keep you motivated.”

Upon physician approval, the program begins with a comprehensive evaluation by the medical center’s expert pulmonary rehabilitation team to develop an individualized treatment plan. Typical treatment plans include a combination of supervised physical exercise, disease education, environmental and nutritional counseling and support to overcome the fear, anxiety and frustration which typically accompany breathing conditions.

For more information about Southeastern Med’s Pulmonary Rehabilitation program, talk to your physician or call the pulmonary rehabilitation staff at Southeastern Med at 740-439-8528.

Chronic Respiratory Diseases

Respiration is the act of breathing. It involves the inhaling of oxygen and the exhaling out of carbon dioxide. Breathing is a vital function of the body, as it helps supply oxygenated blood to the various organs, and aids in elimination of carbon dioxide from the body.

According to the American Lung Association, more than 25 million Americans are living with a chronic lung disease. It is the number three killer in America and nearly 361,000 Americans die of lung disease every year.

Risk Factors

The most important risk factors for preventable chronic respiratory diseases are:

• Tobacco smoking
• Indoor air pollution
• Outdoor pollution
• Allergens
• Occupational risks and vulnerability

General Symptoms Of Respiratory Disorders

Increased breathing rate

A person who has a respiratory disorder often finds it hard to breathe after performing small tasks such as climbing a single flight of stairs.

Color changes

A bluish color is seen around the mouth, on the inside of the lips, or on the fingernails.

Grunting

Grunting is the body’s way of trying to keep air in the lungs.

Nose flaring

As a person is not getting enough oxygen, they have to breathe harder, causing the nasal holes to flare.

Wheezing

Wheezing is a tight, whistling sound heard with each breath. This indicates that the air passages are narrowed, making it harder to breathe.

It is important to understand these general symptoms, as they are key signs of respiratory problems, however only a doctor can make an accurate diagnosis.