Cystic Fibrosis

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What is it?

Cystic Fibrosis is a heredity disease that affects the lungs, the digestive tract, pancreas, liver and kidneys

The body produces thick and sticky mucus and secretions that can clog the lungs and obstruct the pancreas

Different people have different degrees of symptoms

There is no known cure



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Etiology

- CF is due to a mutation in the CF gene on chromosome 7
- The CF gene encodes a protein known as the cystic fibrosis transmembrane regulator (CFTR), which is a chloride channel essential in production of sweat, digestive juices and mucus.
- The abnormal CFTR protein in the patients with the disease leads to disruption of this chloride channels on the cells

Etiology

- Chloride channel disruption prevents them from regulating the flow of chloride ions and water across the cell membranes
- As a result, cells that line passageways of lungs, pancreas, etc. produce mucus that is unusually thick and sticky, clogging the airways and various ducts
- Several mutations of the gene can occur, which determines the severity of the symptoms

Etiology

- The disease is inherited outosomally recessive
 - It means that the parents each carry one copy of the mutated gene but they don't show signs and symptoms



Symptoms

- Salty-tasting skin
- Persistent coughing
- Shortness of breath and wheezing



- Malnutrition and poor growth due to obstruction of the pancreatic digestive enzymes, which cause pancreatitis
- CF's obstruction of the lungs and impaired mucociliary clearance increase the risk of lung infections (bronchitis and pneumonia)
- Increased risk of diabetes and osteoporosis
- Infertility (male congenital absence of vas deferens)
- Meconium ileus in newborns

Epidemiology

CF is the most common life-limiting autosomal recessive disease among people of European heritage

- around 1 in 25 people of Northern European descent and 1 in 30 of Caucasian Americans is a carrier of a CF mutation
- Although technically rare, CF is ranked as one of the most widespread lifeshortening genetic diseases

Diagnosis

- Newborn screening using a genetic test or a blood test. The genetic test shows whether a newborn has faulty CFTR and the blood test shows newborn's pancreas function
 - Sweat test: doctor triggers sweating by applying pilocarpine on skin and then he uses and electrode to provide a mild electrical current to deliver the medication through he skin. The sweat is collected on a pad/paper and then analyzed . High levels of salt confirm diagnosis of cystic fibrosis
- Couple planning for pregnancy or are expecting can test for CFTR mutations and calculate the risk for the child

Treatment

- There is definite cure but management of the disease can allow survival well into adulthood
- Antibiotics: many CF-patients are on one or more ATB at all times, even when healthy, to prophylactically suppress infection
 - Airway clearance: for example postural draining and percussion to get rid of mucus in lungs, chest physiotherapy
 - Aerosolised medication loosen secrections like hypertonic saline



Treatment

Nutritional therapy: pancreatic enzyme supplements, vitamin supplements

- Ibuprofen and azithromycin have been found to preserve and improve lung function
- CFTR modulators: newer drugs targeting faulty CF-causing gene
- Lung transplant



- <u>https://www.medicalnewstoday.com/articles/147960#trea</u> <u>tment</u>
- <u>https://www.medicinenet.com/cystic_fibrosis/article.htm</u>
- <u>https://www.cff.org</u>