

# Pulmonary Rehabilitation for People with Pulmonary Fibrosis

## Pulmonary Rehabilitation for People with IPF and Pulmonary Fibrosis

People with IPF and PF can experience increasing shortness of breath and cough. These symptoms may lead to a progressive decline in physical activities and social isolation, and worsening breathlessness, fatigue, and mood disorders including depression and anxiety.

Pulmonary rehabilitation (PR) has been found to improve physical function, breathlessness (dyspnea), mood and quality of life in people with IPF and other types of pulmonary fibrosis (PF).

Pulmonary rehabilitation includes:



**Exercise training**



**Education on managing your disease**



**Learning how to develop behavior change strategies and stick with healthy behaviors**

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## In-Person Pulmonary Rehabilitation

Most pulmonary rehabilitation in the US is provided in hospital outpatient departments. In-person, center-based PR is at this time considered the most effective and safest model of PR in the US. A national process is in place to help PR programs maximize safety and reduce risk of infections, such as COVID-19. Learn more about ways that PR programs are operating safely at [www.aacvpr.org/Practice/Resources-For-Professionals/COVID-19-Resources](http://www.aacvpr.org/Practice/Resources-For-Professionals/COVID-19-Resources) and [www.thoracic.org/members/assemblies/assemblies/pr](http://www.thoracic.org/members/assemblies/assemblies/pr).

## Virtual Pulmonary Rehabilitation

Some people aren't able to attend an in-person pulmonary rehabilitation (PR) program because of distance or cost. A small number of programs offer virtual or video-based PR. Virtual PR is a relatively new option in the US and is not usually paid for by Medicare for people with IPF and PF. AACVPR and the Pulmonary Fibrosis Foundation (PFF) have developed free, virtual pulmonary rehabilitation resources available at [www.pulmonaryfibrosis.org/PRToolkit](http://www.pulmonaryfibrosis.org/PRToolkit).

Virtual PR is not appropriate for everyone and is not equivalent to center-based PR. If you are able to safely access an in-person program, you should discuss this option with your health care provider, but virtual programs may offer options for appropriate participants. You should speak with your health care provider before starting a virtual PR program to make sure that it is appropriate for you.

## Overview of Pulmonary Rehabilitation

Exercise is the cornerstone of pulmonary rehabilitation (PR), and normally includes aerobic and resistance training. Aerobic training often includes walking, stationary bicycle and other exercises that work large muscles. Resistance

training may include weight lifting with small weights, use of elastic bands, and wall push-ups.

PR also includes disease management education and learning about healthy behaviors. Some topics discussed in PR are included below.



**Symptom management including strategies to control breathlessness, cough, and fatigue**



**Coping with depression, anxiety and stress**



**Oxygen use, self-monitoring, systems, options, and safety**



**Managing activities of daily living with fewer symptoms**



**Exercise prescription including a plan to keep you at your highest level of function**



**Advance directives and long term planning**



**Medication options, actions, use and side effects**



**Prevention, identification, reporting and treatment of serious flares in breathing and lung infections**

## Talk with Your Health Care Provider about Pulmonary Rehabilitation

Talk to your health care provider about PR, including whether you may benefit from PR, and if you should be referred to PR. A national directory for pulmonary rehabilitation can be found at [www.aacvpr.org/Program-Directory](http://www.aacvpr.org/Program-Directory). Virtual PR resources are available at [www.pulmonaryfibrosis.org/PRToolkit](http://www.pulmonaryfibrosis.org/PRToolkit).