

Bronchitis

What is Bronchitis?

Acute Bronchitis is an inflammation of the bronchial tubes that carry air to the lungs that may last a few days or weeks. It is usually caused by a virus or bacteria, and occasionally by a fungus. The inner walls of the bronchial tubes become infected and inflamed, frequently following a respiratory infection such as a cold.

Chronic Bronchitis is a long term condition characterized by a persistent cough, and the production of excessive mucus nearly every day for three months or more. Sometimes inflammation and thickening of the lining of the bronchial tubes becomes permanent leading to shortness of breath and a continual cough that produces large amounts of mucus. Chronic bronchitis, also known as Chronic Obstructive Pulmonary Disease (COPD) is a serious condition that can lead to asthma.



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What are the Symptoms of Chronic Bronchitis?

Over time the lips and skin may appear blue (cyanosis), the lungs may sound abnormal. In addition there may be shortness of breath, chest pains, fever, fatigue, swelling of the feet, and even heart failure.

Diseases which may complicate cases of Chronic Bronchitis

- Cancer of the Lung
- Heart Disease
- Pneumonia
- Pneumothorax (collapsed lung)
- Sleep Disorders
- Pulmonary Embolism (blood clot in the lungs)

Smoking, exposure to smoke, air pollution, or chemical fumes are all risk factors for both acute and chronic bronchitis.

To properly evaluate a client's insurability you must ask the following important questions:

Does the Client Currently Smoke?

Any client with Bronchitis, who continues to smoke, is considered to be an extremely poor underwriting risk. Clients who quit smoking may be able to stabilize their condition, will enjoy better health, and are much more likely to obtain a favorable underwriting outcome.

What Medications is the Client Currently Taking?

Acute Bronchitis is usually caused by a virus and does not require medication. It will generally clear up on its own within a week or two. Most physicians will prescribe Aspirin or Tylenol if there is a fever, drink plenty of fluids, use a humidifier, and do not smoke.

Chronic Bronchitis (COPD) is frequently treated with inhalers to open the airways and in the event of secondary bacterial infection, antibiotics may be prescribed. Occasionally supplemental oxygen is prescribed as well.

Does the Client have any Functional Limitations as a Result of the Bronchitis?

Functional limitations for persons with Chronic Bronchitis include shortness of breath when climbing stairs or walking a short distance.

Does the Client Have a History of Heart Disease?

Many clients with pulmonary disorders also have heart problems. Mild, well-controlled hypertension, together with mild to moderate Bronchitis in a client who does not smoke is insurable. Angina or myocardial infarction with Chronic Bronchitis will almost certainly result in a declination.

Is the Client Involved in Any Kind of Pulmonary Rehabilitation or Undergoing any Lifestyle Changes?

Lifestyle changes can have an enormous impact on underwriting outcome. These may include quitting Smoking, or participation in an Exercise Program, especially swimming. It is important to document all such lifestyle changes that would indicate a decrease in the risk.

Underwriting Outlook

Most clients with Acute Bronchitis do not present any significant underwriting problems. Providing that they are over the bronchitis, and that they do not have a history of frequent, repeated bronchial attacks they may qualify for Preferred or better.

Most clients with mild to moderate Chronic Bronchitis are insurable on some reasonable (frequently sub-standard) basis, providing that they are not still smoking cigarettes.

Chronic Bronchitis sufferers (especially if still smoking, and unbelievably, many still do smoke), who require supplemental oxygen are totally uninsurable.

Chronic Bronchitis sufferers who exhibit shortness of breath, or who cannot walk a short distance without difficulty are usually uninsurable.

Chronic Bronchitis sufferers with angina, myocardial infarction, or other serious heart diseases are almost certainly uninsurable. ❖