



Pulmonary Rehabilitation: An Overview of Its Benefits, Components and Outcomes

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Abstract

Pulmonary rehabilitation (PR) is a multidisciplinary intervention designed to enhance the quality of life and functional capacity of individuals with chronic respiratory diseases such as chronic obstructive pulmonary disease (COPD), asthma, and interstitial lung disease. This article provides an overview of the essential components of PR, which include exercise training, patient education, nutritional support, and psychosocial interventions. Evidence shows that

in managing chronic respiratory conditions. By integrating these elements, pulmonary rehabilitation plays a vital role in improving patient outcomes and should be a standard component of care for individuals with chronic lung diseases.

Introduction

The prevalence of chronic respiratory diseases, including chronic obstructive pulmonary disease (COPD) and asthma, has increased significantly over the past few decades. These conditions are leading causes of morbidity and mortality worldwide. Pulmonary rehabilitation (PR) is a multidisciplinary approach that aims to improve the quality of life and functional capacity of individuals with chronic respiratory diseases. PR typically involves a combination of exercise training, patient education, nutritional support, and psychosocial interventions. The goal of PR is to help individuals manage their symptoms, reduce the frequency and severity of exacerbations, and improve their overall health and well-being.

PR is a multidisciplinary intervention designed to enhance the quality of life and functional capacity of individuals with chronic respiratory diseases. The essential components of PR include exercise training, patient education, nutritional support, and psychosocial interventions. Evidence shows that PR can improve lung function, exercise tolerance, and health-related quality of life in individuals with COPD and asthma. PR should be a standard component of care for individuals with chronic lung diseases.

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Discussion

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Conclusion

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Acknowledgement

Conflict of Interest

References

- 1. Prognostic