



Study Guide: Respiratory Disease in Older Adults

Gerontological Nursing Review and Resource Manual, 4th Edition

1. Core Concept:

Respiratory disease in older adults is driven by:

Age-related physiologic decline + environmental exposures + chronic disease

MUST KNOW CONNECTION:

Aging lungs → ↓ clearance + ↓ elasticity → ↑ infection risk + ↓ oxygenation

High-Yield Exam Insight:

If you see:

- Older adult
- Confusion
- Mild respiratory symptoms

Think pneumonia FIRST



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2. AGE-RELATED RESPIRATORY CHANGES

Structural Changes

- ↓ lung elasticity
- ↓ alveolar surface area
- ↑ residual volume

Functional Changes

- ↓ vital capacity
- ↓ cough reflex
- ↓ mucociliary clearance

Immune Changes

- ↓ immune response
- ↑ infection risk

Study Tip

“Old lungs don’t clear, don’t recoil, don’t compensate”



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3. COMMON RESPIRATORY DISEASES

MUST KNOW LIST:

- COPD
- Asthma
- Pneumonia
- Tuberculosis
- Pulmonary Embolism
- Lung Cancer



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Scenario	Answer	Scenario	Answer	Scenario	Answer	Scenario	Answer	Scenario
Older adult + confusion	Pneumonia	Older adult + confusion	Pneumonia	Older adult + confusion	Pneumonia	Older adult + confusion	Pneumonia	Older adult + confusion
Sudden SOB	Pulmonary embolism	Sudden SOB	Pulmonary embolism	Sudden SOB	Pulmonary embolism	Sudden SOB	Pulmonary embolism	Sudden SOB
Chronic smoker + dyspnea	COPD	Chronic smoker + dyspnea	COPD	Chronic smoker + dyspnea	COPD	Chronic smoker + dyspnea	COPD	Chronic smoker + dyspnea
Wheezing + reversible	Asthma	Wheezing + reversible	Asthma	Wheezing + reversible	Asthma	Wheezing + reversible	Asthma	Wheezing + reversible

4. COPD

Pathophysiology

- Airflow obstruction
- Alveolar destruction
- Mucus production



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Key Symptoms

- Dyspnea (MOST IMPORTANT)
- Chronic cough
- Sputum

Risk Factors

- Smoking (MOST COMMON)
- Pollution
- Occupational exposure

Study Tip

COPD = “Air gets in but can’t get out”

Characteristics include

- Pursed-lip breathing
- Barrel chest

5. ASTHMA

Key Concept

- Reversible airway obstruction



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Symptoms

- Wheezing
- Shortness of breath
- Chest tightness

Study Tip

Asthma = reversible

COPD = progressive

6. PNEUMONIA

Pathophysiology

- Infection → inflammation → fluid in alveoli

Classic Symptoms

- Fever
- Cough
- Chest pain

OLDER ADULT SYMPTOMS

- Confusion
- Weakness
- ↓ appetite



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KEY EXAM POINT TO REMEMBER

Confusion = early sign of pneumonia in older adults

If you see:

- Older adult
- Confusion
- Mild cough

Think Pneumonia

7. TUBERCULOSIS (TB)

Symptoms

- Chronic cough
- Night sweats
- Weight loss
- Hemoptysis

Study Tip

Clinical symptoms of TB = “**Night sweats + weight loss + cough**”

8. PULMONARY EMBOLISM (PE)



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Pathophysiology

- Blood clot blocks pulmonary artery

Symptoms

- Sudden dyspnea
- Chest pain
- Tachycardia

Study Tip

Sudden onset of dyspnea = think PE

9. LUNG CANCER

Risk Factors

- Smoking (BIGGEST)

Symptoms

- Persistent cough
- Hemoptysis
- Weight loss

Study Tip



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Chronic cough that **won't go away** = RED FLAG

10. NURSING ASSESSMENT

MUST INCLUDE:

- Smoking history
- Respiratory rate
- O₂ saturation
- Breath sounds

Study Tip

Always assess:

Airway → Breathing → Oxygenation

11. NURSING INTERVENTIONS

- Oxygen therapy
- Medications (bronchodilators, antibiotics)
- Pulmonary hygiene
- **Patient education**

12. COMPLICATIONS



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- Respiratory failure
- Cor pulmonale
- Pneumothorax
- Secondary infections

Study Tip

Chronic hypoxia → heart strain → cor pulmonale

13. PREVENTION

- Vaccinations (flu + pneumococcal)
- Smoking cessation
- Early treatment
- Pulmonary rehab

Study Tip

Vaccines = MOST effective prevention



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14. CLINICAL THINKING SHORTCUTS

Scenario	Answer	Scenario
Older adult + confusion	Pneumonia	Older adult + confusion
Sudden SOB	Pulmonary embolism	Sudden SOB
Chronic smoker + dyspnea	COPD	Chronic smoker + dyspnea
Wheezing + reversible	Asthma	Wheezing + reversible

Webinar Recording

[Webinar Recording](#)