



AMERICAN
UNIVERSITY OF BEIRUT
MEDICAL CENTER

المركز الطبي في الجامعة الأميركية في بيروت

Hamdi Al-Zaim

ILD Center

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The purpose of this newsletter is to educate the public about Interstitial Lung Diseases

Hamdi Al Zaim Interstitial Lung Disease (Zaim ILD) Outpatient Center continues to accept, evaluate and treat patients with rare and interstitial lung diseases. Interstitial lung diseases (ILD) refer to a broad group of lung disorders that cause inflammation and scarring (fibrosis) of the lungs. This scarring results in stiffness and leads to difficulty in breathing. The purpose of this newsletter is to educate the public about interstitial lung diseases.



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Message from Dr. Ahmad Husari Director of the Hamdi Al Zaim Center

“Hamdi Zaim ILD center provides exceptional and exemplary medical care for patients with ILD by discussing each case at a multidisciplinary care conference. The clinical multidisciplinary team includes, among others, experts in pulmonary, radiology, pathology, rheumatology, thoracic surgery, and other specialties as well. The plan and management will be delineated for ILD patients and cases may be discussed periodically to ensure the wellbeing and progress of outpatients.”

About Hamdi Al Zaim



Hamdi Al Zaim was born on December 1931 and graduated with distinction from Damascus University in 1956 with a bachelor's degree in law. At the age of 22, he began his career in Aleppo at the family cotton trading and manufacturing business and at the age of 32, he became the President of the Cotton Marketing Authority.

In 1968, Zaim relocated to Beirut and established a corporation specialized in manufacturing and trading of electricity cables. Although the corporation proved to be a successful venture, the start of the Lebanese Civil War in 1975 forced Al Zaim to leave Lebanon.

In 1984, Hamdi relocated to Saudi Arabia and established Riyadh Cables, which became over the course of 35 years the pioneer of cable industry in the Middle East. Today, Riyadh Cables Group of Companies has over 3,800 employees and is present in more than 40 countries.

In parallel to commercial success, Hamdi was very active in numerous philanthropic activities that will be mentioned in future newsletters.

In January 2016 and at the age of 84, Hamdi Al Zaim was diagnosed with late stage interstitial lung disease and received medical treatment until passing away shortly after. Prior to his death, he instructed his estate to establish a medical and research center for interstitial lung disease with state-of-the-art equipment, treatments, and research capabilities. This center is the first of its kind in the Middle East and aims to provide better early diagnosis, multidisciplinary collaboration and innovative treatment of the same disease that he was diagnosed with. In addition to the center, a 5-year endowment fund was committed to financially support the treatment of underprivileged individuals.



ILD Multidisciplinary Discussions (MDD)

by Dr. Hisham Bou Fakhreddine

*At the forefront of Lebanon's healthcare innovations stands the American University of Beirut Medical Center (AUBMC), taking giant strides in the management of Interstitial Lung Diseases (ILD) by implementing a pioneering initiative – the Multidisciplinary Discussion (MDD).
ILD comprises a diverse group of lung conditions, notorious for their complexity and the challenges they pose in both diagnosis and treatment. Recognizing these intricacies, AUBMC established the Hamdi Al-Zaim ILD Center, becoming the first institution in Lebanon and the Middle East to introduce a well-structured MDD for advanced ILD diagnosis and management.*

Now that I know I have interstitial lung disease, what should I do next?



1. Connect with an ILD lung specialist

If you have just received a diagnosis of the disease, consider scheduling a consultation with a pulmonologist who has experience treating patients with pulmonary fibrosis. At Hamdi Al Zaim Interstitial Lung Disease Outpatient center, that is a state-of-the-art center, we will provide you with the Up-to-date diagnoses, treatments, and management suggestions thanks to our experienced team of specialists. To assist you just drop an e-mail at zaimild@aub.edu.lb or call us at: 01-350000 ext: 7851, and now, with the availability of telehealth, you can contact our nurses for any concern and schedule an online visit. Our most important concern is that you shouldn't wait till your symptoms worsen, reach out to our team that is always ready to offer any needed help. Your health is our concern.

2. Discuss your treatment options and evaluation process with your specialist

Your doctor may elect to evaluate how severe your ILD disease is. This might include requesting some tests and procedures. These tests include:

1. Pulmonary function test
2. Six-minute walk test
3. Blood tests
4. Chest X-ray
5. High Resolution Chest Computed Tomography (CT) Scan
6. Bronchoscopy
7. Video assisted lung biopsy

For further details about each test/procedure, please refer to our first issue of the newsletter <https://aubmc.org.lb/Documents/publications/newsletter/ILD/ILD-2020.pdf>

3. Treatment Options

A. Medications

Medications related to lung fibrosis will be discussed in our future Issue. In the meantime, discuss your medication options with your ILD lung specialist.

- Nintedanib
- Pirfenidone
- Corticosteroids
- Mycophenolate mofetil/mycophenolic acid
- Azathioprinz

“In this newsletter, we will discuss in details one of the treatment options that your doctor may prescribe to you. This treatment is supplemental oxygen therapy.”

B. Supplemental Oxygen Therapy

The term “interstitium” refers to the region where oxygen enters the blood. Your oxygen levels can decrease if this region becomes enlarged or scarred due to interstitial lung disease (ILD) or pulmonary fibrosis (PF), particularly when you are active.

Many people who require additional oxygen feel fatigued or short of breath. Additional indicators that you may not be getting enough oxygen include irritation, blue lips or fingertips, a rapid heart rate while exercising, and ankle swelling. Scarring causes the lungs to become stiffer and require more effort to breathe, which is the cause of this.

How to Test Oxygen Level

1. Make sure that your hand is warm.
2. Turn on the pulse oximeter.
3. Insert your finger into the oximeter, making sure it is well positioned and not too tight or too loose.
4. Keep an eye on the numbers and wait until they stop changing.
5. Keep a record of the findings.

The oximeter screen will show the percentage of oxygen in your blood; for a healthy person, the saturation level should be between 95% and 100%.



Determining the Need for Supplemental Oxygen

By checking your oxygen levels while you are at rest, walking, exercising, or even sleeping, your healthcare provider can determine whether you need additional oxygen.

The six-minute walk test is commonly used to determine whether you need extra oxygen while walking. The appropriate tests for you will be determined by your doctor. Using a pulse oximeter, your healthcare professional may encourage you to check your oxygen levels on a regular basis.

If testing reveals that your oxygen levels are low, then your healthcare professional will prescribe supplemental oxygen therapy for you.

Oxygen Prescription

Your oxygen prescription, which will contain the following, can only be changed by your ILD healthcare provider:

- When to consume oxygen (during sleep, rest, activity, or at altitude).
- How much oxygen is required for each activity (liters per minute if you use continuous flow).
- What sort of oxygen equipment best suits your lifestyle and oxygen needs.

C. Symptom Management

Preventing Breathlessness

Low oxygen concentrations are a common cause of dyspnea among people with ILD, thus your doctor may advise you to use enough oxygen to keep your oxygen level over 90% even while exerting yourself.

Sometimes breathlessness might still happen even in the absence of low oxygen concentrations. When ILD is advanced, doctors occasionally treat severe dyspnea with medications like morphine.

Pulmonary rehabilitation can help you get in shape and learn techniques to prevent shortness of breath.

Preventing Cough

There are other many causes of cough. Ask your doctor if post- nasal drip or GERD (gastroesophageal reflux disease) could be the cause of your cough. For certain people, low oxygen levels can cause coughing. It is important to ask your doctor if there are any further treatments that might be effective to relieve your cough.



How to Support Your Loved One Living with Pulmonary Fibrosis

1. Take care of yourself: Stay Healthy

1. Maintaining your personal health also contributes to the wellbeing of your loved one.
2. Take some “me” time
3. Caring for your own needs and interests can offer you the power you need to keep going. This can be done through:
 - a. Meditation sessions
 - b. Eating well and exercising
 - c. Making sure to get enough sleep
 - d. Asking family members and friends to help
 - e. Seeking support from a home-health aide when in need.



2. Be actively involved in loved one's treatment

1. Attend doctor's appointments with your loved ones
2. Don't be afraid to ask questions. Make sure you understand what's happening and what you can do to help.
3. Help manage medications. Remind your loved one to take the medications exactly as prescribed and ensure that they are taking them at the right times.
4. Provide psychological support. Being emotionally there for your loved one is just as essential as any physical assistance you may offer. During difficult times, pay attention to them and offer them support.



3. Urge Independence “Don't Hover”

It's important to let the patient be independent and to refrain from watching them all the time. Also, it's essential to support and encourage them to do things on their own, while being available for assistance when needed. Furthermore, it's critical to respect their autonomy and allow them to make their own decisions, as long as they are safe and reasonable.



Glossary

Dyspnea:

Difficulty breathing, shortness of breath, or breathlessness..

Fibrosis:

Scar tissue.

Gastroesophageal reflux disease (GERD):

A medical condition defined by passage of stomach contents into the esophagus (food pipe) and often into the throat. GERD can cause discomfort ("heartburn" or "acid indigestion") and sometimes injures the lining of the esophagus. Also called acid reflux disease.

Interstitial lung diseases (ILD):

A broad category of over 200 lung diseases that affect the lung interstitium. Typically, ILDs cause inflammation, fibrosis (scarring), or an accumulation of cells in the lung not due to infection or cancer.

Interstitium:

The walls of the air sacs of the lung. Your lung is made of air, interstitium, and blood vessels.

Pathologist:

A physician specializing in disease-associated changes in tissue and organs. Pathologists aid in making a medical diagnosis.

Pulmonologist:

A physician specializing in the lungs.

Radiologist:

A physician specializing in using radiology tests (e.g., X-rays) to diagnose illness.

Rheumatologist:

A physician specializing in rheumatic diseases, which may include autoimmune diseases and joint diseases.

Upcoming Event: Pulmonary Fibrosis Awareness Month

As the Pulmonary Fibrosis Foundation (PFF) presents Pulmonary Fibrosis Awareness Month in September, we embrace the theme of "Together We Stand, We Are Back: Pulmonary Fibrosis Awareness Month" reaffirming our unwavering commitment to raising awareness and providing support for those affected by Pulmonary Fibrosis (PF).

Stay Tuned for our upcoming service: Rare Lung Disease



