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To Evaluate the Effect of Incentive Spirometer and Autogenic Drainage in Postoperative Recovery Following CABG for Triple Vessel Disease: A Case Study

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ABSTRACT

Background: One crucial therapy for triple vascular illness is Coronary Artery Bypass Grafting (CABG), which aims to restore heart blood flow. Atelectasis, pneumonia, and decreased lung volumes are examples of pulmonary dysfunction that can impair postoperative recovery and prolong hospital stays. With procedures like autogenic drainage and incentive spirometer being frequently suggested to enhance pulmonary function and lower complications, physiotherapy is essential for improving postoperative recovery. In order to speed up recovery, these methods seek to increase lung expansion, mobilise secretions, and promote oxygenation. This case study aims to investigate these elements in further detail because, despite their widespread usage, there are gaps in the information about the comparative efficiency of various therapies in CABG patients with triple vessel disease.

Purpose: The aim of this case study was to evaluate the effect of incentive spirometer and autogenic drainage in postoperative recovery following CABG for triple vessel diseases. This case study provide a summary of the available data on the benefits of autogenic drainage and incentive spirometry for postoperative recovery after coronary artery bypass grafting (CABG) for triple vascular disease. To find the the effects of these interventions on pulmonary function, postoperative complications, and reduce the length of hospital stay.

Result: Both incentive spirometer and autogenic drainage were found to significantly improve pulmonary function, reduce respiratory complication and enhance the strength of the muscle, reduction in the hospital stay.

Conclusion: The Incentive Spirometer and autogenic drainage were very effective in postoperative coronary artery bypass grafting. There length of hospital stay was reduce & pulmonary function get enhanced.

Keywords: Coronary artery bypass grafting, Pulmonary function, Pulmonary rehabilitation

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