

Pleurisy

Pleurisy is inflammation of the tissue between the lungs and ribcage (pleura).

Symptoms of pleurisy

The most common symptom of pleurisy is a sharp chest pain when you breathe. You sometimes also feel pain in your shoulder.

The pain may be worse when you cough, sneeze or move around. It may be relieved by taking shallow breaths.

Other symptoms include [shortness of breath](#) and a dry [cough](#).

When to contact your GP

Talk to your GP if you have sharp stabbing chest pains when you breathe or other symptoms of pleurisy.

Pleurisy can usually be diagnosed based on your symptoms.

Your GP will listen to your chest. A dry, crunching sound may suggest you have pleurisy.

More tests may be needed to find out what's causing pleurisy and how severe it is.

These tests include:

- [blood tests](#)
- chest x-rays
- an ultrasound scan
- a CT scan
- a biopsy – where a small sample of pleural tissue or lung tissue is removed for further testing

Get immediate medical help if you have severe chest pain, particularly if you also have other symptoms, such as coughing up blood, feeling sick or sweating.

Call 112 or 999 to ask for an ambulance if:

- you have pain that suddenly gets worse and spreads across your abdomen

- your pain temporarily improves before getting worse again

Causes of pleurisy

Pleurisy is usually caused by a virus, such as the [flu virus](#).

Less common causes include:

- bacterial infections, such as [pneumonia](#) or tuberculosis
- [a blood clot](#) in the lungs (pulmonary embolism)
- injury – if the ribs are bruised or fractured, the pleura can become inflamed
- lung cancer
- autoimmune conditions, such as rheumatoid arthritis and lupus

COVID-19 and pleurisy

There's no evidence that COVID-19 directly causes pleurisy, despite having similar symptoms. COVID-19 causes conditions that can lead to pleurisy, such as respiratory infections and pneumonia.

Treating pleurisy

Treatment for pleurisy usually involves relieving the pain and, in some cases, treating the underlying cause.

If treated quickly, pleurisy often gets better without causing any lasting lung damage.

Treating chest pain

Taking non-steroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen, often eases the pain.

If NSAIDs are unsuitable for you, your GP may prescribe another painkiller.

Try different positions when resting to see which one is most comfortable for you. Often lying on the side of your chest that hurts helps reduce the pain.

Treating the underlying cause

If your pleurisy is caused by a viral infection, it will usually get better on its own after a few days.

If it's caused by a bacterial infection, you'll need [antibiotics](#).

If your symptoms are particularly severe or you're already in poor health, you may need to be admitted to hospital.

Treating pleural effusion

Sometimes pleurisy causes a build-up of excess fluid around the lungs called pleural effusion.

Pleural effusion can lead to shortness of breath that gets worse.

This is more likely if pleurisy is caused by pulmonary embolism or a bacterial infection.

If pleural effusion does not clear up as your pleurisy is treated or you're very short of breath, the fluid may need to be drained.

This can be done under general anaesthetic (you will be asleep) or local anaesthetic (numbs a specific area of your body).

The fluid is drained by inserting a needle or tube through the chest wall. You may need to stay in hospital for a few days if a lot of fluid has to be drained away.

Content supplied by the [NHS](#) and adapted for Ireland by the HSE

Sláintecare.

This project has received funding from the Government of Ireland's Sláintecare Integration Fund 2019 under Grant Agreement Number 123.

Page last reviewed: 14 May 2021

Next review due: 14 May 2024

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