

Does Your Child Have PCD?

Primary ciliary dyskinesia (PCD) is a rare inherited disorder caused by defects in the structure and/or function of cilia. Cilia are tiny hair-like structures, which are required to move fluids and particles in various parts of the body, including the airways.

If there are defects in the cilia lining the airways, they are not able to move or clear mucus. This can lead to pulmonary complications, including frequent infections of the lungs, ears, throat and sinuses.

To help with diagnosis, your lung doctor (pulmonologist) may recommend completing the following:

- A consultation with a Children's Minnesota genetic counselor. Genetic counselors discuss and coordinate genetic testing. Genetic testing may include a cheek swab, saliva sample or blood draw. Test results may help to identify a genetic change or changes in a PCD-related gene.
- If your child is 3 years of age or older, your pulmonologist will order a Nasal Nitric Oxide (nNO) test. This is a breathing test to measure the level of nNO in your child's sinuses. Most people with PCD have low levels of nNO in their sinuses.
- A sample of your child's cilia may be collected. This is a minor procedure done by scraping cells from surfaces inside the nose or lower airways.
- Imaging (x-ray, ultrasound, CT) may be ordered for your child to guide the treatment course.
- A sweat chloride test may be done to rule out other causes of recurrent lung infections.