What doctors want patients to know about pneumonia

NOV 18, 2026

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AT A GLANCE: Here are key things you will learn about pneumonia from Abdul M. Khan, MD, a pulmonologist at Ochsner Health in Kenner, Louisiana, in this article:

- Pneumonia is a lung infection commonly caused by viruses or bacteria and spread through respiratory droplets.
- Pneumonia is one of the most common causes of hospitalizations in the U.S.—more serious than a common cold or bronchitis.
- Mild symptoms include fever and cough; severe symptoms include respiratory distress, sepsis, altered mental status and body-wide muscle aches.
- Adults over 65, children under 5, smokers, heavy drinkers and those with chronic lung, heart or liver disease or compromised immune systems face the greatest risk.
- Viral pneumonia is treated with supportive care; bacterial pneumonia requires antibiotics—and overusing antibiotics for colds or viral infections contributes to dangerous antibiotic resistance.

Pneumonia continues to pose a significant public health challenge, particularly for young children, older adults and those with compromised immune systems. This acute respiratory infection, which inflames the air sacs in one or both lungs, can range from mild to life-threatening, often demanding swift medical intervention. As temperatures drop in many areas across the country and respiratory-virus season takes hold, the call to action grows louder: vaccines, awareness and being proactive could be the difference between a mild and a life-altering illness.

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The AMA's What Doctors Want Patients to Know™ series gives physicians a platform to share what they want patients to understand about today's health care headlines.

In this installment, Abdul M. Khan, MD, a pulmonologist at Ochsner Health in Kenner, Louisiana, took time to discuss what patients need to know about pneumonia.

Ochsner Health is a member of the AMA Health System Program, which provides enterprise solutions to equip leadership, physicians and care teams with resources to help drive the future of medicine.

Pneumonia is a lung infection

"The parenchyma or functional tissue of the lungs gets infected and the most common cause of pneumonia is either viruses or bacteria," Dr. Khan said. "Most of the time, pneumonia is spread by droplets that get passed from one person to the other."

"Your upper-respiratory tract—such as your sinuses, nasal passages and airway—is where those viruses and bacteria initially replicate," he explained. "Then you have what we call (micro)aspiration where you inhale them, or you take them down into your airway, because the airway to your lungs sits right behind your esophagus, the feeding tube to your stomach.

"So, that's how organisms get into your lungs. With lung infection, you get cells and pus that accumulate within the lung tissue and the airspace of the lungs," Dr. Khan added.

Pneumonia symptoms start with fever, and can be severe

"What's important to know is a lot of people who have the common cold think they have pneumonia," Dr. Khan said. "But pneumonia is actually an infection of the lungs, the lower airways, and you can be very sick when you have pneumonia."

"The mild symptoms of pneumonia are having a fever and a cough," he said. "Severe symptoms include having respiratory distress, having sepsis, or diffuse infection throughout

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the body," which can lead to other symptoms such as "headaches, fast heart rate and muscle aches and pain throughout the body."

Older patients can also "get confusion when they have pneumonia," Dr. Khan said.

How contagious pneumonia is depends on the cause

"The contagiousness of pneumonia is dependent on the virus or bacteria or, in some small cases, fungus that cause it. It's how contagious the organism that causes pneumonia is," Dr. Khan said. "For example, the virus associated with COVID-19 was very contagious.

"So, you had the spread of the virus, and one of the main health disease processes was that it caused pneumonia as well as lots of other medical issues," he added. "COVID-19 was and is a very contagious disease."

Additionally, "there's other bacteria and other viruses that aren't as contagious, but there are certain risk factors and it's more about if you have a risk factor that would increase your risk of having pneumonia," Dr. Khan said.

Fungal pneumonia is rare but more severe than viral or bacterial

"Fungal pneumonias predominantly occur in people who are in areas that are endemic to those fungus and who have an immune compromised state," Dr. Khan said, noting that "fungal pneumonias can be much more severe than a viral or bacterial pneumonia."

"Overwhelmingly, when you get fungal pneumonia where there's fungus growing in your lungs, you are extremely sick. Those people are admitted in the hospital and sometimes in an intensive care unit," he said.

Age can increase risk for pneumonia

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“People who are younger than 5 or older than 65 are at increased risk of pneumonia and as you get younger than 5, your risk increases,” Dr. Khan said. “So, the younger you are, you have an increased risk and the older you are from 65 up to 80, every year you have an increased risk of getting pneumonia” and being hospitalized.

“If you have chronic lung or heart conditions—people with COPD, asthma or other underlying lung conditions—you are also at increased risk,” he said.

“Chronic liver disease is another big risk factor of getting pneumonia,” Dr. Khan said. “Also, smoking and heavy alcohol use are known risk factors of getting pneumonia.

A lung exam and X-ray will help diagnose pneumonia

“There are two big categories for pneumonia. There’s community acquired pneumonia, which is the biggest category, meaning that you acquired it through things outside of the hospital,” Dr. Khan said, adding that there’s hospital acquired pneumonia which is acquired in a hospital setting.

“Community acquired pneumonia is contracted through other people who have the infection, or getting a viral or bacterial infection in the upper airways,” he said. “Your doctor will do a good lung exam or order a chest X-ray to diagnose pneumonia.”

Pneumonia isn’t like bronchitis or a cold

“Bronchitis is within the airways itself—it’s inflammation of the airways, not the lung tissues, which is pneumonia,” Dr. Khan said. “If you have the common cold, you might have an overgrowth of those viruses in your upper airways, your nose, your oropharynx, the back of your mouth, the back of your throat.”

But “a big difference is the fact that it’s a progression of the disease. Pneumonia is much more severe and when you have a common cold, you might be at risk of developing pneumonia downstream if you don’t improve or if you have a decreased immune system,” he said.

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Viral pneumonia means supportive care

“There are some medications that you can use to treat certain viruses that cause pneumonia, such as with COVID-19 or the flu, that might decrease how long you have symptoms,” Dr. Khan said.

“But for the most part, when you have pneumonia associated with viruses, good supportive care is the only treatment,” he added.

Bacterial pneumonia needs antibiotics

“For bacterial infections, the Infectious Diseases Society of America offers guidelines about the best antibiotics to use,” Dr. Khan said, noting “there is a group of antibiotics you offer to outpatients. If a doctor feels you meet criteria to be admitted to a hospital you will get antibiotics that cover a broader range of bacteria.”

“As you have increased risks, whether you have underlying lung disease or were recently in a health care facility, you can broaden the different antibiotics that cover for the bacteria you may be infected with,” he added. Also, “you hear about MRSA, or methicillin-resistant *Staphylococcus aureus,* if a patient has recently been discharged from a hospital or lives in a nursing home or recently had the flu. MRSA pneumonias tend to be more severe.

“If a patient has risk factors, then we’ll think about covering more broadly with different antibiotics,” Dr. Khan added.

Get vaccinated to protect yourself from pneumonia

“The most common cause of bacterial pneumonia is *Streptococcus pneumoniae*,” Dr. Khan said. “Getting your pneumococcal vaccine for the most common bacterial causes and then getting your vaccines for the flu or COVID-19 will help decrease your risk of it progressing to severe pneumonia.”

Pneumococcal vaccination is recommended by the CDC for children younger than 5 and adults 50 years or older. Vaccination is also recommended for children and adults at

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increased risk for pneumococcal disease.

“They’re effective in decreasing the risk of getting pneumonia” from these bacteria, Dr. Khan emphasized.

Home remedies only help with pneumonia symptoms

“Unfortunately, pneumonia is an infection of the lungs, so once infected, by this point you have already seeded your lungs with infection,” Dr. Khan said. “A lot of home remedies are things that mostly involve treating your sinuses, treating the back of your throat to help you feel better from that standpoint to decrease mucus production.”

“The home remedies are going to have little effect on the actual treatment of pneumonia,” he said, noting “they might make some of symptoms such as cough or runny nose feel a little better. But they aren’t going to treat the pneumonia itself.”

Recovering from pneumonia often takes weeks

“When you have community-acquired pneumonia, it takes weeks to improve. Antibiotics are typically recommended for five to seven days” for bacterial pneumonia, Dr. Khan said. “The reality is that the complete improvement takes several weeks, as does the finding on imaging such as an X-ray and CT scan.”

“Even though you usually only take antibiotics for less than a week, you may continue to have symptoms for several weeks,” he said. “And if you spend time in the hospital, it might even take longer than that.”

“When your fever stops and there’s improvement with antibiotics, then you can return to work or school,” Dr. Khan said. “Once you’re feeling better from a viral pneumonia or you don’t have a fever from bacterial pneumonia, you’re likely not contagious at that point and it’s more about how strong you feel and how weak you were from the pneumonia regarding when you can return to work or school.”

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Overprescribing antibiotics can lead to resistant bacterial strains

“In the hospital, antibiotic-resistant strains of bacteria are a concern,” Dr. Khan said. “It’s important that everyone who walks around with sniffles or a sore throat doesn’t get antibiotics.”

“Resistance can increase if every time you go to an urgent care or an emergency department or a doctor’s office and say you have a cold or a sore throat, you are prescribed antibiotics,” he added. “Hospitals have programs led by infectious disease specialists to be good stewards of antibiotic therapy. Antibiotics should be stopped appropriately and timely.”

“It’s a concern in the outpatient setting, too. It is really important to go to see your doctor to get a proper lung evaluation and exam,” Dr. Khan said. “You really do need to get evaluated prior to antibiotics so we don’t create more antibiotic resistance.”

Don’t minimize severity of pneumonia

“Most people don’t recognize the severity of pneumonia,” Dr. Khan said. “When you have a cold, you get better in a few days. When you have a bacterial pneumonia, most of the time you will only get better with treatment.”

“If you start having shortness of breath and respiratory symptoms outside of cough and fever, then you should not wait to see your doctor. The longer you wait, the more likely you are to have complications,” he said. “If you need to be hospitalized for pneumonia, you have an increased risk of worse outcome for every hour that you are without appropriate antibiotic treatment.”

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