

Breathing Better With a COPD Diagnosis

DID YOU KNOW?

COPD is the 3rd leading cause of death in the United States and causes serious, long-term disability. The number of people with COPD is increasing. More than 12 million people are currently diagnosed with COPD and an additional 12 million are likely to have the disease but don't know it.

But there is reason for hope. You've taken the first step by being aware of your symptoms and seeing your doctor or healthcare provider for testing and diagnosis. Now that you know you have COPD, your provider can suggest treatment options and ways to help you manage COPD and improve your quality of life.

WHAT IS COPD?

COPD is a serious lung disease that over time makes it hard to breathe. You may also have heard COPD called by other names, like emphysema or chronic bronchitis.

In people who have COPD, the airways—tubes that carry air in and out of your lungs—are partially blocked, which makes it hard for the air to get in and out. COPD develops slowly and worsens over time, so be sure to call your doctor or healthcare provider to report any new symptoms or if your current symptoms get worse.

WHEN YOU ARE DIAGNOSED WITH COPD

There are many things that you can do to make living with COPD easier:

Quit Smoking

If you smoke, the best thing you can do to prevent more damage to your lungs is to quit. Ask your provider about new options for quitting. Many resources to help you quit are available online. Visit www.smokefree.gov; www.lungusa.org; or call 1-800-QUIT NOW for more information.

Talk with your doctor or healthcare provider about treatment options. You can take steps to make breathing easier and live a longer and more active life.

Avoid Exposure to Pollutants

Try to stay away from other things that could irritate your lungs, like dust and strong fumes. Stay indoors when the outside air quality is poor. You should also stay away from places where there might be cigarette smoke.

Visit Your Healthcare Provider on a Regular Basis

See your doctor or healthcare provider regularly, even if you are feeling fine. Be sure to bring a list of all medicines you are taking to each office visit.

Follow Treatment Advice

Be sure to take your medications and follow your provider's advice on how to treat your disease. If you have any questions—ASK!

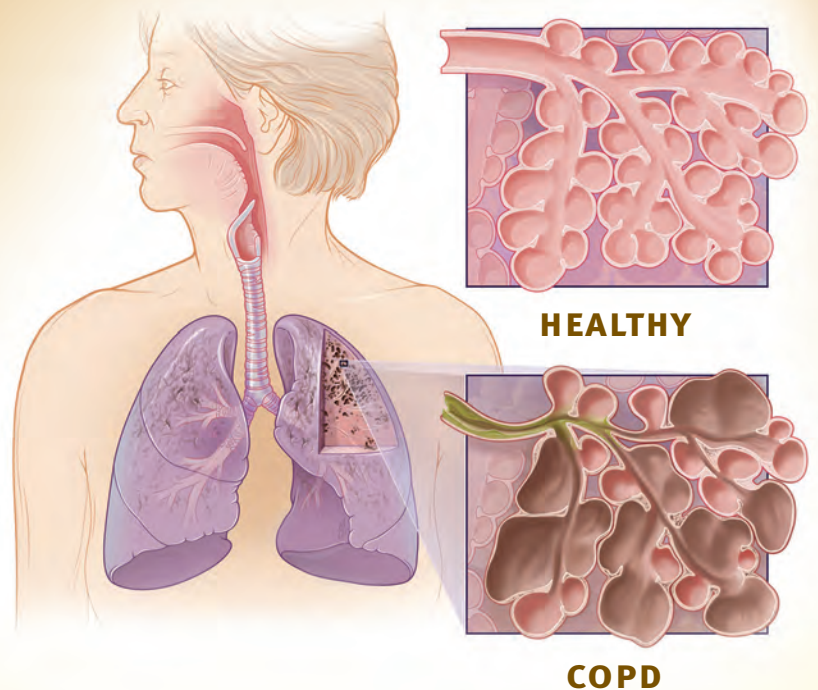


U.S. Department of Health and Human Services
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How Does COPD Affect Breathing?

The “airways” are the tubes that carry air in and out of the lungs through the nose and mouth. Healthy airways and air sacs in the lungs are elastic—they try to bounce back to their original shape after being stretched or filled with air, just the way a new rubber band or balloon does. This elastic quality helps retain the normal structure of the lung and helps to move the air quickly in and out.

In people with COPD, the air sacs no longer bounce back to their original shape. The airways can also become swollen or thicker than normal, and mucus production might increase. The floppy airways are partially blocked, or obstructed, making it even harder to get air out of the lungs.



Take Precautions Against the Flu

Do your best to avoid crowds during flu season. It is also a good idea to get a flu shot every year, since the flu can cause serious problems for people with COPD. You should also ask your provider about the pneumonia vaccine.



Seek Support From Other COPD Patients

There are many COPD support groups offered at local hospitals and there is a very active COPD community online. Family members are also a great resource for support as you learn to live with and manage COPD.

TAKING ACTION

Once you have been diagnosed with COPD, there are many ways that you and your healthcare provider can work together to manage the symptoms of the disease and improve your quality of life. They may suggest one or more of the following options:

Medications (such as bronchodilators and inhaled steroids)

Bronchodilators are medicines that usually come in the form of an inhaler. They work to relax the muscles around your airways, to help open them

and make it easier to breathe. Inhaled steroids help prevent the airways from getting inflamed. Each patient is different—your doctor or healthcare provider may suggest other types of medications that might work better for you.

Pulmonary Rehabilitation

Your healthcare provider may recommend that you participate in pulmonary rehabilitation, or “rehab.” This is a program that helps you learn to exercise and manage your disease with physical activity and counseling. It can help you stay active and carry out your day-to-day tasks.

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Physical Activity Training

Your healthcare provider or a pulmonary therapist they recommend might teach you some activities to help your arms and legs get stronger and/or breathing exercises that strengthen the muscles needed for breathing.

Lifestyle Changes

Lifestyle changes such as quitting smoking can help you manage the effects of COPD.



Oxygen Treatment

If your COPD is severe, your doctor might suggest oxygen therapy to help with shortness of breath. You might need oxygen all of the time or just some of the time your provider will work with you to learn which treatment will be most helpful.

Surgery

Patients with very severe COPD may have a hard time breathing all the time. In some of these cases, doctors may suggest lung surgery to improve breathing and help lessen some of the most severe symptoms.

SPIROMETRY CAN HELP DETERMINE THE BEST COURSE OF TREATMENT

Spirometry is a simple, noninvasive breathing test that measures the amount of air a person can blow out of the lungs (volume) and how fast he or she can blow it out (flow). The spirometry reading can help your doctor assess how well your lungs are working and determine the best course of treatment.



Spirometry is one of the best and most common lung function tests. The test is done with a spirometer, a machine that measures how well your lungs function, records the results, and displays them on a graph. You will be asked to take a deep breath, then blow out as hard and as fast as you can using a mouthpiece connected to the machine with tubing. The spirometer then measures the total amount of air exhaled, called the forced vital capacity or FVC, and how much you exhaled in the first second, called the forced expiratory volume in 1 second or FEV₁. Your doctor or healthcare provider will use the results to assess how well your lungs are working and whether or not you have COPD.

WHEN TO GET EMERGENCY HELP

Seek emergency help if your usual medications aren't working and:

- You find that it is unusually hard to walk or talk (such as difficulty completing a sentence).
- Your heart is beating very fast or irregularly.
- Your lips or fingernails are gray or blue.
- Your breathing is fast and hard, even when you are using your medication.

Be prepared and have information on hand that you or others would need in a medical emergency, such as a list of medicines you are taking, the name of your doctor or healthcare provider and his/her contact information, directions to the hospital or your provider's office, and people to contact if you are unable to speak or drive yourself to the provider or hospital.



Managing Complications

Symptoms of COPD can get worse all of a sudden. When this happens, it is much harder to catch your breath. You might also have chest tightness, more coughing or a change in your cough (becomes more productive, more mucus is expelled), and a fever.

When symptoms get worse quickly, it could be a sign of a lung infection. There could be other causes for symptoms getting worse, such as heart disease related to severe lung damage. The best thing to do is call your healthcare provider right away so he or she can find out what the cause of the problem is and take steps to treat it.



LEARN MORE BREATHE BETTER

If you think you might be at risk for COPD, get a simple breathing test. Talk with your doctor or healthcare provider about treatment options. You can take steps to make breathing easier and live a longer and more active life.

For more information, visit <http://COPD.nhlbi.nih.gov>.

Or contact the National Heart, Lung, and Blood Institute at www.nhlbi.nih.gov.

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U.S. Department of Health and Human Services
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National Heart
Lung and Blood Institute

People Science Health
NIH Publication No. 07-5841
Originally printed September 2006
Reprinted September 2011