

Understanding COPD

What is COPD?

Chronic Obstructive Pulmonary Disease (COPD) is a broad term for smoking-related lung disease that may lead to shortness of breath, cough and wheezing. The damaged lungs of COPD patients can make breathing difficult and limit activity.

COPD is often a mix of two diseases: chronic bronchitis and emphysema. In chronic bronchitis, inflammation occurs in the bronchial tubes. The inflammation narrows these tubes, making it difficult to breathe. Some people with chronic bronchitis may also have a persistent cough that brings up mucus.

In emphysema, lung tissue and the tiny air sacs at the end of the airways in the lungs are damaged. When these sacs are damaged, air is trapped in the lungs, leading to shortness of breath.

What causes it?

Nearly everyone with COPD (80% to 90%) has been a long-term cigarette smoker. Pipe, cigar and secondhand smoke are also risk factors. Symptoms typically arise after 20 years of smoking. Other lung irritants that are inhaled over a long period of time – such as industrial dust and chemical fumes – are also thought to cause COPD. Additional factors that may make individuals more likely to develop COPD include a family history of the disease, a low birth weight and repeated lung infections.

Who has COPD?

At least 14 million people in the United States have COPD. It affects both men and women and is most often diagnosed in middle-aged or older people.

What are its symptoms?

Symptoms of COPD can vary from person to person but usually include shortness of breath, a chronic cough or wheezing. Since COPD develops slowly, it may be many years before a person notices symptoms.

If the COPD is caused primarily by chronic bronchitis, the first symptom will typically be a cough that lasts for months and produces mucus, while emphysema symptoms usually begin with shortness of breath and limited activity. Most patients have some degree of all of these symptoms.

COPD will continue to progress with time and with continued smoking. As it does, lung function worsens and shortness of breath increases during activity. Later, people with COPD may be out of breath with little or no activity and find it difficult to do everyday activities. At times, shortness of

breath, wheezing and cough may suddenly get much worse. This is called a “COPD exacerbation.” A COPD exacerbation can be mild to life-threatening.

How serious is it?

COPD is the fourth leading cause of death in the United States. In 2000 alone, COPD resulted in 1.5 million emergency room visits, 726,000 hospitalizations and 119,000 deaths. By 2020, it is projected to be the third leading cause of death for both males and females.

How is COPD diagnosed?

The first step in diagnosing COPD is a medical history and physical exam by a doctor. Following the evaluation, the doctor may order pulmonary function tests to evaluate a patient’s breathing and x-rays or other tests to confirm the diagnosis. These tests are also performed to rule out other conditions with similar symptoms, like asthma or heart failure.

How is it treated?

Although there is no cure for COPD at this time, it can be managed. Treatment focuses on slowing the progression of the disease and relieving symptoms. Some medications are used long-term on a daily basis to ease and prevent symptoms; others are used as needed for short-term relief of symptoms. The most important step a person can take to slow the disease is to stop smoking.

COPD patients are often enrolled in a pulmonary rehabilitation program that includes counseling, education, exercise, breathing exercises and nutritional guidance. Rehab programs may help reduce symptoms, improve quality of life and reduce COPD exacerbations.

Oxygen therapy is needed when oxygen levels in the blood are low. At first, patients usually need oxygen just at night and with exercise. Later, oxygen may be required all the time.

Patients with very advanced COPD may benefit from surgery such as lung-volume reduction or a lung transplant. These surgeries are usually performed on people who have disabling symptoms in spite of the best medical treatment.

How can COPD patients stay as healthy as possible?

Since people with COPD are more likely to get colds and the flu, they should get a pneumonia vaccine and flu shot every year. Eating healthy foods on a regular basis is also important as it provides the body with the energy it needs to function and helps strengthen the body’s natural defense system.

It is vital that people with COPD remain active. Exercise builds muscle strength and endurance and can sometimes reduce shortness of breath. COPD patients can usually make exercise a part of their pulmonary rehabilitation program. COPD patients should always consult a health professional before starting an exercise program.

More information about COPD

A patient's own lung specialist is the best source for information about COPD.

Other sources include:

The American Lung Association

www.lungusa.org

National Institutes of Health, National Heart, Lung and Blood Institute

www.nhlbi.nih.gov

Contact Us

For more information/question or comment about COPD

Contact us at info@thelungcenter.co.in