

## **Did you know?**

**COPD is the 4th leading cause of death in the United States. The disease kills over 120,000 Americans each year and causes serious, long-term disability. The number of people with COPD is increasing. More than 12 million people have been diagnosed with COPD and an estimated 12 million likely have the disease and don't even know it.**

## **What is copd?**

**COPD is a term that is used to describe a number of progressive lung diseases like emphysema, chronic bronchitis, and refractory asthma. It is a serious disease that makes it hard for air to get in and out of the lungs. In people who have COPD, the airways in your lungs are partly blocked, causing patients to have several common symptoms.**

## **What are the symptoms?**

**Symptoms can get in the way of everyday life. It can cause you to have trouble breathing when doing simple tasks such as doing housework, walking, bathing and getting dressed.**

- Constant coughing, sometimes known as "smoker's cough"**
- Shortness of breath while doing daily activities**
- Excess sputum production**
- Feeling like you are unable to breathe**
- Not being able to take a deep breath**
- Wheezing**

**COPD develops slowly, and can worsen over time, so be sure to report any symptoms you might have to your doctor, no matter how mild they may seem.**

## **Are you at risk?**

Most people who are at risk for getting COPD have never even heard of it and, in many cases, most don't even realize that the condition has a name. Some of the things that put you at risk for COPD include:

### **Smoking**

Most COPD is caused by breathing in unhealthy toxins or poisons and smoking is the number one cause of COPD in the United States. It most often occurs in people age 40 and over with a history of smoking (either current or former smokers), although as many as 1 in 6 people with COPD never smoked.

### **Environmental Exposure**

COPD can also occur in people who have had long-term exposure to things that can irritate your lungs. Examples include certain chemicals, dust, or fumes in the workplace. Heavy or long-term exposure to secondhand smoke or other air pollutants may also lead to COPD.

### **Genetic Factors**

In some people, COPD is caused by a genetic condition known as alpha-1 antitrypsin (AAT) deficiency. While very few people know they have AAT deficiency, it is estimated that as many as 100,000 Americans have it. People with this deficiency can develop COPD even if they have never been a smoker or had long-term exposure to harmful pollutants.

## **How does COPD affect the lungs?**

The "airways" are the tubes that carry air in and out of the lungs through the nose and mouth. Healthy airways and air sacs called alveoli are elastic, so they try to bounce back to their original shape after being stretched or filled with air, the same way a rubber band or balloon does. This elastic quality helps retain the normal shape of the lung and helps to move the air quickly in and out. In people with COPD, the alveoli 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.

## **Living with COPD**

**COPD is a progressive and currently incurable disease, but with the right treatment, there are many things you can do to manage this disease and breathe better. There are several ways you can make living with your COPD easier:**

### **Quit Smoking Now!**

**If you smoke, quitting now is the best way to minimize the damage to your lungs. Stopping smoking can slow down the progression of COPD. It will also make your treatments more helpful and within just a few weeks of stopping smoking, your breathing, coughing, and clogged sinuses can improve. There are many resources online for quitting. Ask your doctor about nicotine replacement.**

### **Avoid Pollutants**

**COPD can also be caused by breathing in dust, fumes, or chemicals over an extended period of time. This normally happens at work but can also happen at home. Do your best to stay away from other irritants like dust, strong fumes, and second-hand smoke. Stay indoors if the air quality outside is poor.**

### **See your doctor**

**Always visit your doctor on a regular basis, even if you feel fine. Keep an up to date list of all medications when you visit.**

### **Listen to your doctor**

**Always follow your doctor's advice and remember to take your medication regularly! And of course, if you have any questions about your COPD, ask your doctor.**

### **Take Precautions Against the Flu**

**Avoid crowds as much as possible during the flu season. Be sure to get a flu shot every year, since the flu can cause serious problems for people with COPD.**

### **Seek Support From Other Patients**

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

### **Spirometry Can Help Your Doctor Determine the Best Course of Treatment**

**Spirometry is a simple breathing test that measures the amount of air a person can blow out of their lungs (volume) and how fast he or she can blow it out (flow). The spirometry reading can help your doctor determine how well your lungs are working and find the best course of treatment. The test is done with a spirometer, a device that measures how well your lungs function, records the results, and displays them on a graph for your doctor. 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. Your doctor will use the results to assess how well your lungs are working and whether or not you have COPD.**

doctor will work with you to learn which treatment will be most helpful.

## **Taking action**

Once you have been diagnosed with COPD, there are many ways that you and your doctor can work together to manage the symptoms of the disease and improve your quality of life. Your doctor 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 may suggest other types of medications that might work better for you.

### **Pulmonary Rehabilitation**

Your doctor 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.

### **Physical Activity Training**

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

### **Oxygen Treatment**

If your COPD is severe, your doctor might suggest oxygen therapy to help with shortness of breath. You might need oxygen all the time or just some of the time—your

