

CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)



BASIC INFORMATION

DESCRIPTION

A term used to describe two related disorders (chronic bronchitis and emphysema) that involve impaired air-flow in and out of the lungs. Women are more often affected by chronic bronchitis, while men are more often affected by emphysema.

FREQUENT SIGNS AND SYMPTOMS

Chronic bronchitis:

- Frequent cough or coughing spasm. Mucus is usually present. It is thick and difficult to cough up. The mucus color and thickness may change according to whether infection is present.
- Shortness of breath.

Emphysema:

- Often, no symptoms in the early stages.
- Shortness of breath. It becomes worse over several years.
- Lung infections.
- Weight loss.
- Some wheezing or coughing.
- Little mucus is produced.

CAUSES

Bronchitis is caused by production of excess mucus in the lungs. Emphysema causes tiny air sacs in the lungs to become permanently enlarged. Patients with COPD have features of both conditions.

RISK INCREASES WITH

- Cigarette smoking or secondhand smoke.
- An inherited form of emphysema.
- Chronic exposure to dust, ozone, chemicals, smoke, traffic exhaust fumes, sulfur, and others.
- Frequent lung infections in childhood. They can lead to scarring of lung tissue.
- Aging.
- Personal history of allergies or lung disorders.

PREVENTIVE MEASURES

The most important measure is to avoid smoking. Also, avoid breathing smoke from other people's cigarettes. Secondhand smoke can also lead to this condition.

EXPECTED OUTCOME

Lung function will continue to worsen over time. More and more effort is needed to get air in and out of the lungs. Treatment can help relieve symptoms and help prevent infections. Treatment may help you to lead a more active and productive life. Survival times are very different from person to person. Younger patients may have a better prognosis than older persons.

POSSIBLE COMPLICATIONS

- Frequent infections, anxiety, and depression.
- Other lung diseases, heart failure, and death.



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider will do a physical exam and ask questions about your symptoms and activities. Medical tests may include blood studies, x-rays and lung function testing.
- Goals of treatment are to relieve symptoms, slow progression of the disorder, and prevent complications.
- Treatment may include drug therapy, lifestyle changes, supplemental oxygen, special exercises, and sometimes, surgery. You and your health care provider will discuss a treatment plan depending on your individual needs. Educate yourself about this disorder.
- Usually, you can be treated at home. Hospital care may be needed for infections or if symptoms get worse.
- If you smoke, stop immediately. This is the most important thing you can do. Avoid secondhand smoke and other lung irritants (air pollution, fumes, dust).
- Get vaccine for pneumonia and yearly flu vaccine.
- Avoid excessive heat, cold, and very high altitudes. Talk to your health care provider about airplane travel.
- Lung surgery or a lung transplant may be an option.
- Joining a support group is helpful for some patients.

MEDICATION

- Drugs may be prescribed to improve the symptoms. They can help open narrowed airways, reduce inflammation, treat or prevent infections, and reduce the amount of mucus in your lungs.
- Drugs may be prescribed for depression or anxiety.

ACTIVITY

- Not being active for long periods of time can make your disability worse. Try to maintain a regular exercise program. Walking is usually a good way to exercise.
- Your health care provider may prescribe physical therapy or special breathing exercises.

DIET

Eat a well-balanced diet. Drink plenty of fluids each day.



NOTIFY OUR OFFICE IF

- You or a family member has symptoms of COPD.
- Any signs of infection develop (such as fever).
- Symptoms get worse despite treatment.

Special notes:

More notes on the back of this page