

Patient Education Sheet

What is COPD?

WHAT IS COPD?

Chronic Obstructive Pulmonary Disease (COPD) is a term that refers to chronic bronchitis and emphysema. It is a serious lung disease that causes the airways in the lungs to become "obstructed" or blocked, making it harder for you to breathe. While COPD can't be cured, it can be treated.

WHAT CAUSES COPD?

Chronic Bronchitis: Cigarette smoking is the most common cause of chronic bronchitis. Chronic bronchitis rarely occurs in the nonsmoker. Environmental pollution and second hand smoke may contribute to the development of chronic bronchitis.

Emphysema: Cigarette smoking contributes to the destructive processes that end up as emphysema. It is believed that emphysema often is a late effect of chronic infection or irritation of the bronchial tubes. The purpose of the lungs are to allow oxygen to enter the blood when air is breathed in, and waste gas (carbon dioxide) to be removed from the lungs by breathing out. COPD interferes with this process. When infection or irritation continues or is repeated over a period of time, stretching and destruction of the walls of the lung's air spaces occurs. The lungs as a whole may become enlarged, and less efficient in exchanging oxygen for carbon dioxide. .

WHAT ARE THE SIGNS AND SYMPTOMS OF COPD?

Chronic cough - any cough that lasts a month is chronic. This is an early symptom that something is wrong with your breathing system.

Shortness of Breath –labored or difficult breathing is best described as being hard to draw air into your lungs or breathe it out.

Chronic mucus production - The lungs produce excess mucus or sputum as a defense response to infection or irritants. Excess mucus production lasting a month or longer could indicate an underlying problem.

Wheezing - noisy breathing, or wheezing, is a sign that something unusual is blocking the airways of your lungs or making the airways too narrow.

Coughing up blood (hemoptysis) - if you are coughing up blood, the blood may be coming from your lungs or upper respiratory tract. Whatever the source of the blood, it signals the onset of a health problem.

Frequent chest colds - if you have more than two colds a year, or if one lasts more than two weeks, you may have an underlying disorder.

HOW DO WE TREAT COPD?

Prevention- The important point to remember is that patients with COPD who continue to smoke, continue to get worse quickly. Smoking cessation will stop this rapid decline and there may actually be a slight improvement in the ability to lead a normal life. Vaccinations against influenza should be received annually and a vaccination against bacterial pneumococcal pneumonia should be received at least once in a lifetime. In some cases, your physician may recommend the pneumococcal (or pneumonia) vaccine be given again.

Rescue Therapy -Short acting medicine which is utilized “as needed” to help you catch your breath when your breathing suddenly gets worse. This therapy works quickly and lasts 4-6 hours.

Maintenance Therapy - Long acting medicine is taken every day to help manage your COPD. This will help reduce the need for rescue inhalers, and will work gradually. It lasts 12-24 hours and should be taken every day, even when your breathing is under control.

WHAT IS A COPD EXACERBATION?

COPD exacerbation (or flare up) is a worsening of your daily symptoms due to narrowing or constriction of your bronchial tubes. This “narrowing” limits the airflow in your lungs and worsens your symptoms of cough and shortness of breath.

WHAT ARE THE SIGNS AND SYMPTOMS OF EXACERBATIONS?

Any change in your sputum - including color, odor, thickness, or blood in sputum

Any worsening of your shortness of breath, coughing, or wheezing

Inability to perform your usual activities due to shortness of breath

Any confusion, headache, forgetfulness, or sleepiness

Waking up at night due to shortness of breath

Fever or chills

Using your rescue medication more than normal

Fingernails or lips getting grey or blue

HOW TO TREAT EXACERBATIONS

Steroids - used to decrease inflammation in the lungs. This treatment decreases the swelling - opening the airway. Steroids can be taken in the form of pills, injection, or inhalation.

Antibiotics - most common cause of COPD exacerbation is lung infection - Bronchitis or Pneumonia. Antibiotics are used to treat the bacteria causing these infections.

Nebulizers - this is an aerosol treatment that delivers bronchodilators to the lungs. These bronchodilators relax the bronchial tubes, opening the airway.

Supplemental oxygen - may be required if your lungs are unable to provide your body with enough oxygen to work normally.

Acapella - used to loosen mucus in the airways and help cough it up.

QUIT SMOKING - Danbury Hospital offers a smoking cessation program to stop smoking and a smoking cessation support group. This program includes medication therapy, behavior changes, and ongoing support services.

For more information please contact Marianne Mitchell at (203) 739-8161.

PULMONARY REHABILITATION PROGRAM

- Danbury Hospital offers a program that can improve a patient’s overall quality of life. The program includes: education about COPD, education about medications and equipment, exercise, support groups, and nutritional education.

For more information on this program please contact Patricia Dilauro at (203) 739-8319

Sources;

The American Lung association @<http://www.lungusa.org>

Center for Disease Control and Prevention @www.cdc.gov

National Heart, Lung, and Blood [Institute@www.nhlbi.nih.gov](http://www.nhlbi.nih.gov)