

# What I need to know about COPD

## What is COPD?

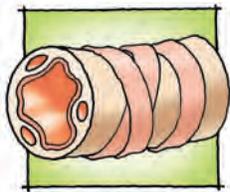
COPD stands for Chronic Obstructive Pulmonary Disease.

This is a broad term for emphysema, chronic bronchitis and long-standing asthma.

COPD is caused by exposure to cigarette smoke and other irritants that damaged your lungs.

<b>C</b> hronic	Does not go away (but can be treated)
<b>O</b> bststructive	Your bronchial tubes or airways are narrowed and can collapse when you exhale. Narrow airways block or obstruct the flow of exhaled air causing shortness of breath and trouble clearing phlegm
<b>P</b> ulmonary	In both lungs
<b>D</b> isease	Like all diseases, COPD varies from mild to severe

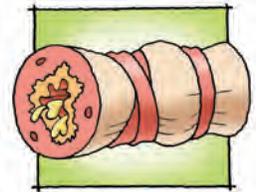
### Normal Airways



Muscles surrounding the bronchial tubes are relaxed. Airway stretchiness helps to keep them open.

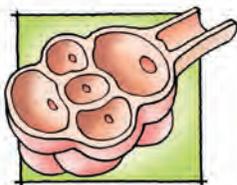
**COPD develops slowly and worsens over time**

### Airways with COPD



Airways become red, swollen and irritated. Phlegm can block some air from passing through. Airways lose their shape and stretchiness. Surrounding muscles can tighten up and squeeze the airways closed.

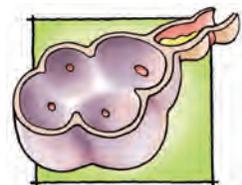
### Normal Air sacs



The tiny air sacs at the tip of the lungs become damaged. They should be elastic like a balloon. They lose their stretchiness and trap air inside them. This air trapping makes it hard to move air in and out of the lungs.

**You must act now**

### Damaged Air sacs



## What are the main symptoms of COPD?

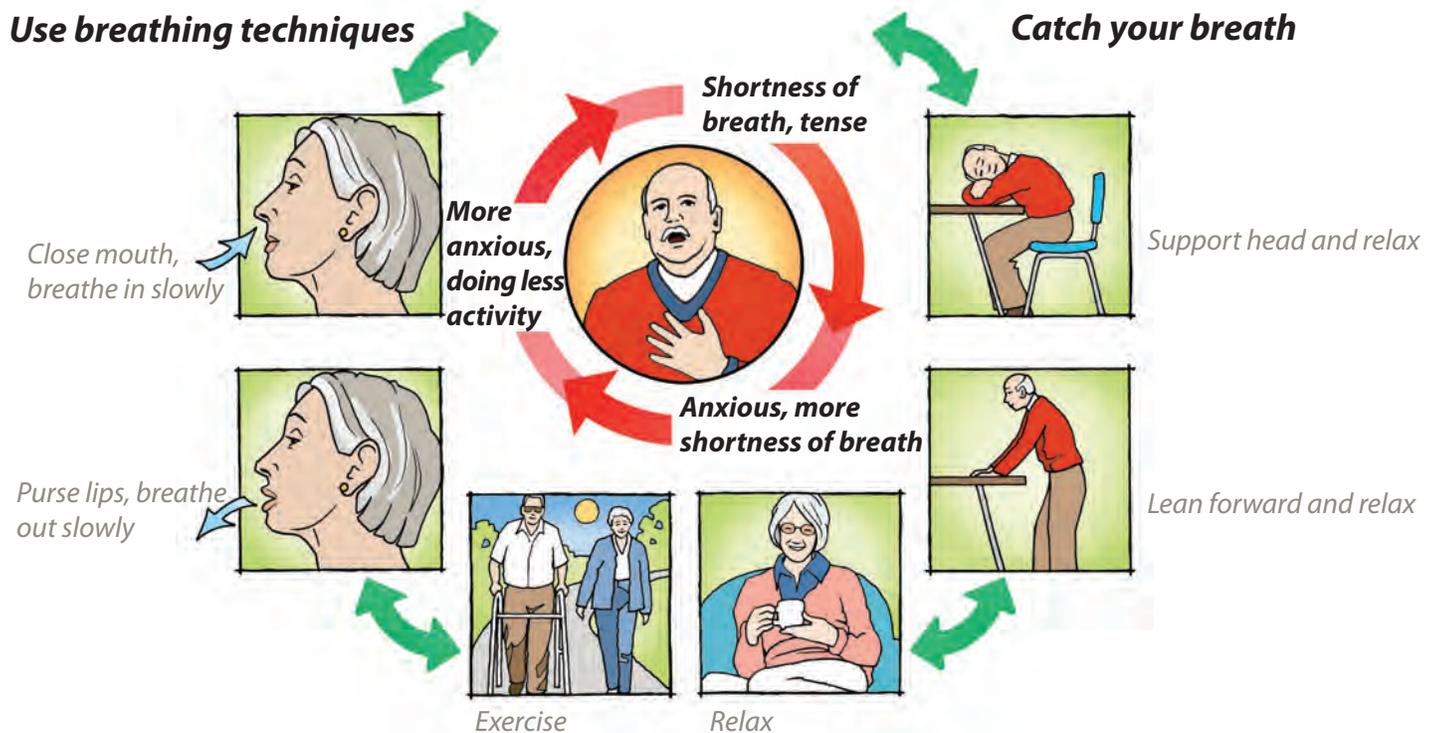
*Cough and phlegm*

*Shortness of breath — mostly when you hurry or walk up hill*

### **COPD is a breathing out problem:**

- You may breathe in normally, but can't breathe out completely because of narrowed airways.
- Increased activity can trap stale air in your lungs because when you breathe faster more air enters your lungs than can leave.
- Air trapping causes your lungs to over-expand leaving no more room to breathe. You feel short of breath.

## Breathing techniques to break the cycle of breathlessness



## How to manage your COPD

- Severe COPD can affect your whole body and mental health.
- If you smoke, stopping smoking is the best way to begin managing your COPD.
- Regular exercise, taking inhalers properly and learning ways to slow your breathing will help reduce shortness of breath. Oxygen does not help.
- Tension, anxiety and worry can make you feel more tired and short of breath. Speak to your healthcare team about how to plan time for activities you enjoy.
- It's important that you don't feel rushed.
- Use breathing exercises, such as those illustrated above, and practice relaxation techniques.

## What is a COPD flare up?

An infection or swelling in your bronchial tubes causing increased shortness of breath, cough, phlegm, and/or a change in phlegm colour.

Flare ups are not pneumonia. Pneumonia involves your lung air sacs and often causes cough, chest pain, fever, and difficulty breathing.

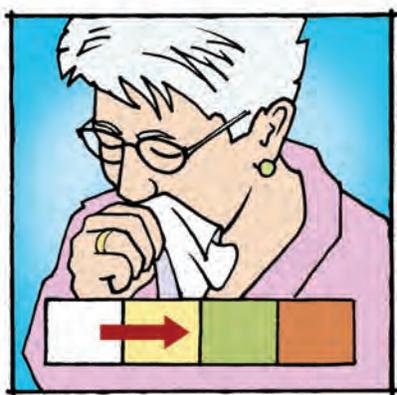
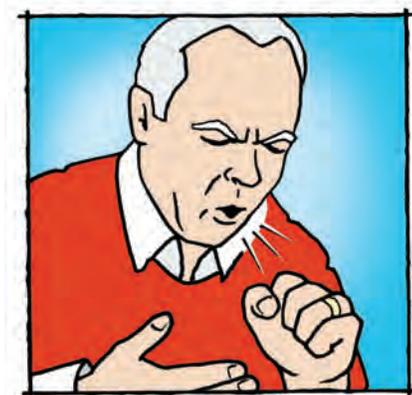
COPD flare ups cause distress, lung damage and may be fatal.

It is important to be able to recognize a flare up.

## How can I recognize a flare up?

A flare up is when the following COPD symptoms get worse over a period of 24 - 48 hours:

- 1. More cough or wheeze than is normal for you**
- 2. More phlegm production than normal and/or the colour changes from normal to yellow, green or rust colour**
- 3. More shortness of breath than is normal for you**



## Watch for flare up when:

*You get a cold or the flu*

*You feel run down or tired*

*You are exposed to air pollution, including second-hand smoke*

*The weather changes*

*Your mood changes — such as feeling down or anxious*

## If you have a flare up, and have had symptoms for 24 - 48 hours you should:

Call your doctor

Start your action plan, if you have one

Increase the use of your blue rescue inhaler (Ventolin, Bricanyl) to 2-4 puffs, 4-6 times per day, to relieve shortness of breath

## Community Support Listings

Ask your physician about which of the following programs is right for you or available in your area:

### **1. Breathe Well Program**

An at-home program that helps patients being discharged from the hospital manage their COPD

### **2. Pulmonary Rehabilitation/Breathe On Programs**

Physician-referred exercise/education for patients with diagnosed lung disease

### **3. Community Respiratory Program**

An at-home program that helps patients manage their COPD. For patients that do not qualify for the Breathe Well Program

### **4. Home Oxygen Program**

A program that assists patients who need oxygen in their homes

For more information on any of the programs listed above, please call: \_\_\_\_\_

## Resources for stopping smoking

- *Stopping smoking is the number one treatment for COPD.*
- *COPD patients who smoke do poorly.*
- *Many smokers are addicted to nicotine and feel distress without cigarettes.*
- *Although quitting may be difficult, the good news is that we have great people, programs and medications to help you butt out.*
- *Stopping smoking is more a journey than an event.*

### **To begin the journey:**

- **Talk to your doctor, pharmacist, and other health professionals.**
- **Call 811 to register for free nicotine patches and nicotine gum.**
- **Champix and Zyban are now covered under the Pharmacare program like other medications. A doctor prescription is required.**
- **Call or click 24 hours per day: 1 877 455 2233 or [www.quitnow.ca](http://www.quitnow.ca)  
This is a great resource for smokers who want to quit.**

#### Websites

#### **The BC Lung Association**

[www.lung.ca](http://www.lung.ca)

*Learning resource for COPD: Breathworks*

#### **The Living Well with COPD website**

[www.livingwellwithcopd.com](http://www.livingwellwithcopd.com)

*This site has learning modules to manage your COPD*