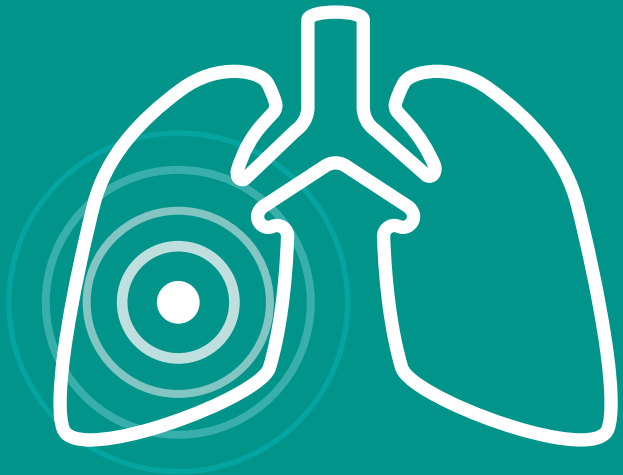
Chest Heart & Stroke Scotland

COPD

Chronic Obstructive Pulmonary Disease



ESSENTIAL GUIDE

This Essential Guide is about chronic obstructive pulmonary disease (COPD).

It explains:

- What COPD is.
- Answers to some of the most common questions about COPD.
- How COPD is treated.
- Things you can do to help manage your COPD.

What is COPD?

Chronic obstructive pulmonary disease (COPD) is the name given to a group of long-term health conditions which cause breathing difficulties and long-term damage to your airways. This damage makes it increasingly hard for air to move in and out of your lungs.

CHRONIC = long-term

OBSTRUCTIVE = narrowed airways

PULMONARY = related to the lungs

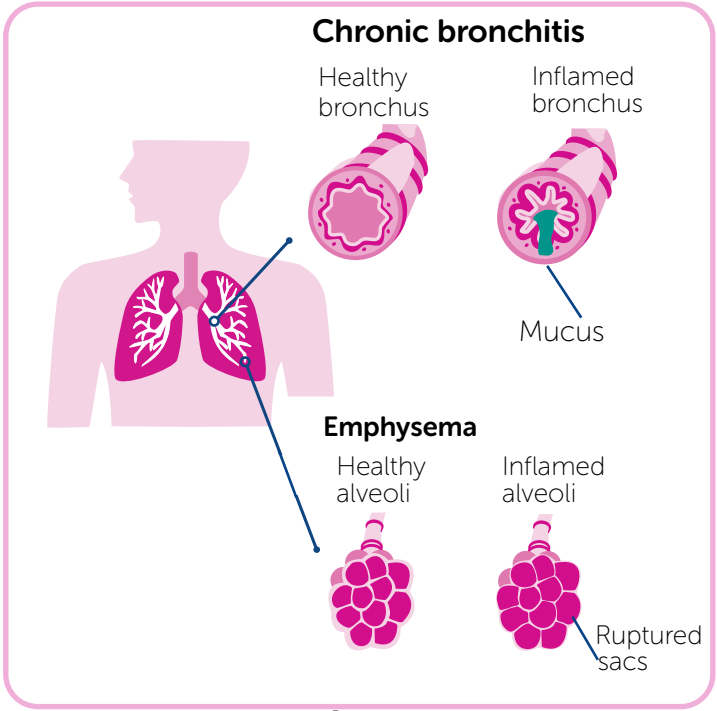
DISEASE = illness

COPD includes:

- Chronic bronchitis
- Emphysema

Chronic bronchitis is long-term inflammation (swelling) of the airways (**bronchi**) leading into your lungs.

Emphysema is damage to the air sacs (**alveoli**) in your lungs.



What causes COPD?

The main cause of COPD is smoking.

Other causes include:

- **Working around dust, chemicals, or fumes - now, or in the past.**
- **Poor air quality where you live.**
- **Long-term asthma.**
- **Genetic factors.**

Up to **1 in every 4** long-term smokers will develop COPD at some point in their life.

The main symptoms of COPD

feeling breathless during everyday activities such as walking or shopping

coughing

wheezing

producing mucus
(sputum, phlegm, spit)

extreme tiredness
(fatigue)

Other common symptoms include:

- Frequent chest infections.
- Reduced appetite.
- Weight loss.

How is COPD diagnosed?

To find out whether you have COPD, your doctor will ask you questions. They may also do some tests. These can include blood tests, breathing tests, and/or a chest x-ray.

You may also have a spirometry test to confirm your diagnosis and monitor your health. This measures how much air you can breathe out in one forced breath and the total amount of air you can breathe out.

Early diagnosis and treatment of COPD can make a big difference. If you suspect you have symptoms, you should speak to your doctor as soon as possible. Many people do not know that they have COPD, and some people have symptoms for many years before going to the doctor.

What is the treatment for COPD?

There is currently no cure for COPD, and symptoms often get slowly worse over time. However, you can take steps to manage your symptoms and improve your quality of life.

You may be referred to a specialist clinic to make sure you get the right treatment. You may also see other health professionals to help you manage your symptoms and make your everyday life easier.

This might include:

- **An occupational therapist.**
- **A physiotherapist.**
- **A specialist respiratory nurse.**

A range of treatment is available, including **medication**, **oxygen therapy**, or **lifestyle changes**.

Lifestyle changes

Taking steps to live a healthier lifestyle can make your symptoms less severe and mean that they develop less quickly.

Stop smoking

If you smoke, quitting is the most important thing you can do to help your COPD and prevent further lung damage. It is unclear what effect vaping may have on COPD.

You are 4x more likely to give up smoking for good if you get professional help than if you do it on your own. Help is available through **Quit Your Way Scotland** on **0800 848 484**.

Manage your weight

Extra weight around your chest, or being underweight, can stop your lungs working well.

Healthy eating

A balanced diet, with a limited alcohol intake, can help you to avoid or fight infections which may make your COPD worse.

Vaccination

COPD flare-ups are often caused by infections. Being up to date on your vaccines can help make this less likely. Recommended vaccines include the Flu vaccine, the Pneumococcal vaccine, and the COVID-19 vaccine.

Know your triggers

Some people find that things like smoke or pollen make their breathlessness worse. Know your triggers and try to avoid them.

Text WEATHER to 66777 to receive a free air quality and weather text message from Chest Heart and Stroke Scotland.

Pulmonary rehabilitation

Pulmonary rehabilitation (**PR**) is a programme of exercise, education, and support. It is designed to help you to manage your COPD and safely improve your general health.

Everything you do in PR will be adapted to make sure that it is safe and right for you.

PR has lots of benefits for both your physical and mental health. It can help to reduce your risk of being admitted to hospital. As well as help improve your fitness and teach you how to manage chest infections.

If you think PR may be helpful for you, you can ask your doctor or healthcare team to refer you to a PR clinic in your area.

Medications

The most common treatment for COPD is medication given using an inhaler (with or without a spacer). These help you to breathe medicine straight into your lungs.

Your healthcare professional will discuss with you if an inhaler is right for you.

It is important that you know how to use your inhaler, and spacer if ou have one, correctly. Ask your healthcare professional to make sure you are using it in the right way.

Find out more about inhalers and how to use them at **mylungsmylife.org**

Other medication

If your COPD suddenly gets worse (also known as a flare-up or exacerbation), you may be prescribed medication for short-term use. This might be steroids or antibiotics.

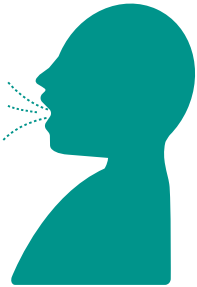
Breathing techniques

Breathing control techniques can help with breathlessness.

These can involve gentle breathing using your diaphragm (the main breathing muscle in the base of your chest).

The position in which you sit or stand can also help you to breathe more easily.

Your health professional can give you chest clearing techniques to help you to remove mucus from your lungs, letting you breathe more easily.



Some examples of techniques include:

Relaxed, slow, deep breathing
Get into a comfortable position, relaxing your shoulders. Breathe in gently through your nose, then out through your mouth

Pursed-lips breathing
Breathe in through your nose, then out through your mouth with lips pursed as if blowing on a cup of hot chocolate. This slows your breathing down.

Blow as you go
Breathe in first, before you do an activity that takes a lot of effort, and breathe out while you are doing the activity.

Paced breathing
Breathe in and out in time with the activity you are doing. For example, when walking up stairs, you could breathe in on one step and breathe out on the next step.

Chest clearance

There are different techniques you can use to help clear sputum (mucus) from your airways. This can help you breathe more easily, prevent infections, and reduce coughing. Speak to a specialised physiotherapist if you are struggling.

The main technique is **the active cycle of breathing**. This combines three practices:

- Breathing control.
- Deep breathing (Thoracic Expansion Exercises or TEE).
- Huffing (Forced Expiration Technique).

They can be combined into one practice:

1) Breathing control

Use gentle, relaxed breathing, using the lower part of your chest. Relax your upper chest and shoulders. Your tummy should rise and fall as you breathe in and out.

2) Deep breathing/Thoracic Expansion

Thoracic expansion exercises, or deep breathing, focus on filling your chest to dislodge any stuck sputum.

Take a slow, relaxed deep breath in. Hold your breath for a count of 3, then let out the breath slowly, relaxing.

3) Huffing/Forced Expiration Technique

This technique forces air out of your lungs to push sputum up through your airways.

Take a slightly deeper than normal breath. Then, with your mouth open, push the air out quickly and forcibly. You should feel your stomach tense. Repeat until you have no air left, then relax and breathe normally.

Here are some positions that may help:

Sit down and lean forwards

Rest both arms on your thighs

Relax your hands and wrists

Sit upright with your back against the chair

Rest both hands on your thighs, relaxing your hands and wrists.

Stand up

Lean forwards with your arms resting on a ledge.

Standing, lean your back against a wall, shoulders relaxed and arms resting down by your sides.

If it feels comfortable, move your feet around 30cm away from the wall. Keep your feet slightly apart.

What should I do if my symptoms change?

Keep an eye on your symptoms and know when to see your doctor.

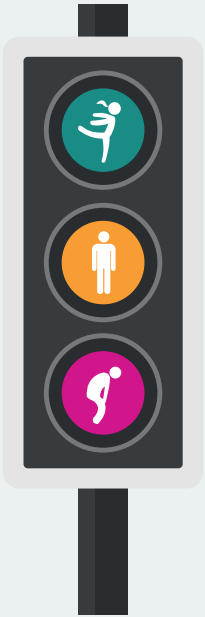
If your COPD suddenly gets worse try to notice this and understand why it has happened. This is sometimes called a **flare-up** or **exacerbation**.

Tell your doctor or health professional if your symptoms change or you develop any new ones. Early treatment can help you to avoid being hospitalised.

Meet with your doctor or nurse at least once a year to talk about how you are managing your COPD.

You may find our "**Traffic Lights for COPD**" resource helpful.

This resource supports you to better understand your COPD and know what to do when you become unwell.



You can order this, and other useful resources, at:
www.chss.org.uk/resources-hub

Or speak to your doctor or nurse about getting a copy.

Can I still be active?

Yes! It is **important to stay active if you have COPD**. Avoiding activity may make your breathlessness worse and make flare-ups more serious.

Regular physical exercise helps to improve your breathing, increase your energy levels, and improve your immune system and overall health.

Talk to your GP or health professional about what activities are right for you. They can help you find activities to suit your symptoms and capabilities.

You can learn more in our **Physical Activity Essential Guide.**

Oxygen therapy

If your COPD is bad, you may be prescribed oxygen, either in hospital or at home. You will be given a nasal cannula which are short tubes placed in your nostrils, connected to a tank of oxygen. You may need to wear this at all times, only at night, or only when you have a severe flare-up.

Inhaling oxygen can help to reduce the symptoms of COPD by making it easier for your body to absorb oxygen.

IMPORTANT

Oxygen tanks are flammable. Never have an open flame or lit cigarette near your oxygen tank.

You may need additional home or car insurance if you are storing oxygen tanks.

Finding support

Chest Heart and Stroke Scotland
We offer a range of support and advice for people with COPD. To find out more:
Call our Advice Line: **0808 801 0899**
Email: **adviceline@chss.org.uk**
Visit: **www.chss.org.uk**

NHS Inform
A central NHS Scotland site which includes information and advice for patients.
www.nhsinform.scot/illnesses-and-conditions/lungs-and-airways/copd

Asthma + Lung UK
A charity which offers help to people with lung conditions, including COPD.
www.asthmaandlung.org.uk/conditions/copd-chronic-obstructive-pulmonary-disease

Our publications are free to everyone in Scotland, in PDF and in print. See them all at **www.chss.org.uk/resources-hub**

For free, confidential advice and support from our Advice Line Team, contact:

0808 801 0899 (Mon-Fri 9am-4pm)
text ADVICE to 66777
adviceline@chss.org.uk

One in five people in Scotland are affected by chest, heart and stroke conditions or Long Covid. Go to **www.chss.org.uk/supportus** to find out how you can help us support more people in Scotland.

To give feedback or request alternative formats, email: **health.information@chss.org.uk**

Chest Heart & Stroke Scotland

NO LIFE HALF LIVED

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Patient Information Forum

Scan here to see all our resources!

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