BREATHE the lung association



COPD means Chronic Obstructive Pulmonary Disease. It is a term that covers two types of chronic (long-term) diseases where the airways (breathing tubes) in the lungs become swollen and partly blocked. COPD gets worse over time. It cannot be cured, but it can be treated and managed.

COPD consists of two major breathing diseases: emphysema and chronic bronchitis.

Emphysema damages the tiny alveoli (air sacs) at the tips of your lungs. Normally these air sacs stretch like balloons as you breathe in and out. Emphysema makes these air sacs stiff. Because they cannot stretch, air gets trapped inside them. This makes it difficult for you to breathe in and makes you feel tired.

Chronic bronchitis makes your airways red, swollen and irritated. Glands in your airways make extra mucus (phlegm), which blocks some air from passing through. This makes you cough, cough up mucus and feel short of breath.

Many people with COPD have both of these diseases.

Signs and Symptoms of COPD

COPD diagnosis often surprises people. It might start with being short of breath while walking up or down the stairs or a cough that does not go away. Some people think that feeling short of breath is a normal sign of aging, but that is not the case.

People with COPD usually have some or all of these symptoms:

- Feeling short of breath, especially during physical activity
- Feeling tired
- A cough that lasts longer than three months
- Coughing up mucus
- Wheezing
- Getting several infections such as the cold, flu or pneumonia and taking longer to recover

See your doctor if you have these signs and symptoms.

Causes of COPD

Below are some of the main causes of COPD:

- Smoking is the number one cause of COPD
- A rare genetic disorder called Alpha-1 antitrypsin deficiency
- Second-hand smoke
- Air pollution (dust or chemicals)
- Repeated lung infections during childhood
- Severe asthma
- Asthma combined with smoking

Diagnosis

To diagnose COPD, your doctor or other healthcare provider will ask you questions about your health history. Some of the questions may include:

- Do you currently smoke or have you smoked in the past?
- How often are you short of breath?
- What makes your shortness of breath worse?
- Do you cough? How long have you been coughing?
- Do you cough up sputum (phlegm, mucus)?
- Do you or does anyone in your family have a lung disease?
- Did you have a lot of lung infections when you were younger?

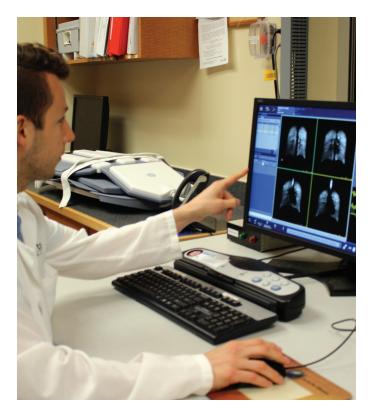
Spirometry

Spirometry is the most reliable way to diagnose COPD. It is a simple breathing test that measures the speed and the amount of air you are able to blow out of your lungs. If you have any of the symptoms or are short of breath doing simple tasks, ask your healthcare provider about sending you for a spirometry test.

Chest X-ray

The chest x-ray will help the doctor see if there is damage to your lungs. An x-ray can show emphysema in your lungs. A chest x-ray alone is not enough to diagnose COPD; spirometry is the recommended test for a diagnosis.





Oximetry

This painless test measures how much oxygen is in your blood (oxygen saturation). Your doctor or another healthcare provider will clip a "probe" to your finger to measure and monitor the saturation of oxygen in your blood. This alone does not diagnose COPD but could be one of the tests that leads to a diagnosis.

Other Tests

Your healthcare provider may order other tests like a CT scan, blood work and other laboratory tests. Blood work and/or other lab tests are done in combination with other tests for a proper diagnosis.

