Chronic Obstructive Pulmonary Disease







COPD refers to a group of diseases that cause lung damage resulting in airflow blockage and breathing-related problems.

There are two main diseases that fall under COPD:

Chronic Bronchitis
 Emphysema

What are the **Symptoms of COPD?**

- Frequent cough and/or wheezing
- Chronic excess phlegm, mucus or sputum production
- Shortness of breath, especially with activity
- Difficulty taking a deep breath

How did I get

- Smoking
- Chemical exposure (work-related or environmental)
- Previous lung infections, like Pneumonia
 - Family history

What are the **Complications of COPD?**

- Activity limitations, such as difficulty running errands, walking and engaging in social activities
- Low Oxygen levels
- Special equipment needs such as portable oxygen tanks
- Depression
- Poor quality of life
- Other chronic conditions
- Increased confusion and memory loss

Call	at
with any of the following symptoms:	
My COPD Medications:	
My Oxygen Needs:	
Date of last Flu Vaccine:	Date of last Pneumonia Vaccine:



COPD affects an estimated **30 million**Americans and was the 3rd leading
cause of death in 2017



Women are more commonly affected than men. COPD occurs most commonly in those ages 65 and older

What can I do to live my best life with COPD?

Educate yourself:

Know the early warning signs of disease flare ups.

Make YOU a priority:

- Quit smoking
- Avoid second-hand smoke and other pollutants
- Discuss pulmonary rehabilitation with your provider
- Take your bronchodilators and other medications as directed
- Avoid lung infections by staying up-to-date on Flu and Pneumonia vaccinations
- Use supplemental oxygen as needed

Recognize and have a plan for setbacks. Try these interventions:

- Pursed-lip breathing
- Breathing from the diaphragm
- Effective coughing
- Good eating habits
- Exercise

see reverse for demonstration

source: American Lung Association

Breathe Easier with these Techniques:

Pursed Lip Breathing:



Relax the muscles in your neck and shoulders.



Sit in a comfortable chair with your feet on the floor.



Inhale slowly through your nose for two seconds.



Feel your belly get larger as you breathe in.



Pucker your lips, as if you were going to whistle or blow out a candle.







Breathing from the Diaphragm



Sit or recline comfortably in a chair.



Relax your upper chest, shoulder, back and neck muscles.



Place one hand on your belly and the other on your chest so that you can feel the movement.



Inhale slowly through your nose. As you inhale, your abdomen should rise as your chest fills up with air, while keeping your chest as still as possible.



Exhale slowly through pursed lips. As you do this, your abdomen should fall.



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Repeat.

Effective or Controlled Coughing:



Sit on a chair or on the edge of your bed, with both feet on the floor. Lean slightly forward. Relax.



Fold your arms across your belly and breathe in slowly through your nose.



To exhale: Lean forward, pressing your arms against your belly. Cough two - to three times through a slightly open mouth. Coughs should be short and sharp. The first cough loosens the mucus and moves it through the airways. The second and third cough enables you to cough the mucus up and out.





Breathe in again by "sniffing" slowly and gently through your nose. This gentle breath helps prevent mucus from moving back down your airways.



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Rest.

Perform again if needed



Tips:

- Avoid breathing in quickly and deeply through your mouth after coughing. Quick breaths can interfere with the movement of mucus up and out of the lungs and can cause uncontrolled coughing.
- Drink six to eight glasses of fluid per day UNLESS your doctor has told you to limit fluid intake. When mucus is thin, coughing is easier.
- Use the controlled coughing technique after you use your bronchodilator medication or any time you feel mucus (congestion) in the airways.