

THE  LUNG ASSOCIATION™

## THE BREATHWORKS PLAN

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

## About this Guide

**If you think you might have COPD, if you know you have it, or if you know someone else who has it — this guide can help.**

If you think you might have COPD, this guide can help you get the information you need to get an early and accurate diagnosis.

If you've been diagnosed with COPD, you may already know some of the challenges ahead. Learning about how to live with COPD can help make your future more certain, more hopeful. This guide is a first step toward learning to manage your disease. Share this guide with your family, friends and caregivers.

**This guide can help you learn to:**

- *prevent and slow the progression of your COPD*
- *relieve your symptoms*
- *improve your health and better manage your COPD*

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# COPD and Your Health

Breathing – we all do it. It’s easy for most people. We take it for granted. But if you have COPD, breathing can be a struggle.

**Chronic Obstructive Pulmonary Disease** – that’s what COPD means – is a long-term disease that makes it hard to move air in to and out of your lungs. Once you’ve got COPD, you can’t get rid of it. In fact, your COPD may get worse. But there are ways you can manage your COPD and treat your symptoms.

Many people with COPD live satisfying, hopeful lives. So can you. Learning how to manage your COPD is the first step to feeling better. And that’s what this guide is all about – helping you to recognize whether you have COPD and, if you do, helping you learn to manage it.

## The Lung Association's BreathWorks program

We know that COPD can affect every part of your life. Climbing stairs, preparing a meal, or taking a walk – simple things you once did without a second thought – become serious challenges.

COPD can keep you from working. It can change relationships with your spouse, your family and friends, and your co-workers. In fact, the emotional toll of COPD can be as big as the physical symptoms. But you can learn to cope with your symptoms and your feelings.

The BreathWorks Program is designed to help you and your family cope with the emotional and physical challenges of living with COPD. We will give you the support and practical information you need to live a full life.

You'll find our BreathWorks **Coach** in this guide. Just like an actual coach, the BreathWorks **Coach** helps you get the best from yourself - helping you to help yourself.

The BreathWorks **Coach** is here to:

- *answer your questions*
- *direct you to important information*
- *encourage you to take charge of your COPD symptoms*

To learn more about COPD, and to get free, confidential advice, call our BreathWorks COPD Helpline. A Certified Respiratory Educator will answer your questions about COPD:

The Lung Association's BreathWorks COPD Helpline:  
**1-866-717-COPD (2673)**

**You can also visit our** website at **[www.lung.ca/copd](http://www.lung.ca/copd)** for detailed information about COPD.

## What is COPD?

COPD is short for Chronic Obstructive Pulmonary Disease. It means the airways (breathing tubes) in your lungs are swollen and partly blocked. COPD is a long-term disease that gets worse over time.

**COPD can't be cured, but it can be treated.** With the right treatment, people with COPD can lead active lives and live for many years. People can learn strategies for living with COPD.

COPD includes two major breathing diseases:

- *chronic bronchitis*
- *emphysema*

The **chronic bronchitis** part of COPD makes your airways red, swollen and irritated. The glands in your airways make extra mucus (phlegm), which blocks some air from passing through. This makes you cough, spit up mucus, and feel short of breath.

The **emphysema** part of COPD damages the tiny air sacs (alveoli) at the tips of your lungs. Normally your air sacs are stretchy, like balloons – they stretch out as you breathe in and shrink as you breathe out. But emphysema makes your air sacs stiff. They can't stretch anymore, so air gets trapped inside them. This makes it hard for you to take in air and it makes you feel tired.

COPD is on the rise in Canada and around the world. More than 750,000 Canadians have COPD. Lung Association research shows that many more have COPD symptoms but have not yet been diagnosed.

## Signs and symptoms of COPD

People with COPD usually have some of these symptoms:

- *feeling short of breath*
- *feeling tired*
- *coughing, and coughing up phlegm (mucus)*
- *wheezing*
- *getting lung infections a lot (the flu, pneumonia– it usually takes you longer than most people to get better after a cold)*
- *losing weight without trying*

COPD is the kind of disease that sneaks up on you. It might start with a cough that doesn't go away. Or maybe you notice you're short of breath when you walk up the stairs.

People might think that feeling short of breath is a normal sign of aging but it's not. If you have these signs and symptoms, see your doctor. Ask for spirometry, a simple test that measures how much air you move out of your lungs.



## Quick COPD test

If you are over 40 and you smoke, or you used to smoke, take this quick test:

	YES	NO
1. Do you cough regularly?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you cough up phlegm (mucous) regularly?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do even simple chores make you short of breath?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you wheeze when you exercise or do chores, or at night?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you get a lot of colds, and do they last longer than other people's colds?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered yes to one of these questions, you may be at risk for COPD. Ask your doctor about a simple breathing test called spirometry.

If you do have COPD, it's really important to get diagnosed early. The sooner you're diagnosed, the easier it is to treat your COPD.

## Ask the BreathWorks Coach

### *“Why are my COPD symptoms different from other people’s COPD symptoms?”*

People with COPD can have a range of symptoms and triggers (things that make their symptoms worse). Some people get short of breath from walking. Other people wheeze and cough up a lot of mucus (phlegm). Some people find it hard to breathe cold air. Other people find it hard to breathe warm, humid air. Each person’s symptoms and triggers are a little different.

There are different stages to COPD. Someone with early-stage COPD may be active, exercise a lot and live a fairly normal life. Someone with severe COPD might have a less “normal” life— he might need to take oxygen all the time and he might not be able to walk far or exercise much.

Your treatment depends on your symptoms and your stage of COPD. The great thing is that you can improve your symptoms and slow down your disease by taking medicine, joining a pulmonary rehab group or exercising on your own, and making healthy choices. Even people with advanced COPD can become more fit and more healthy if they get the right treatment and get active.


## What causes COPD?

Smoking is the main cause of COPD in 80-90% of cases. Other things that can cause COPD are:

- *a rare genetic disorder called Alpha-1 antitrypsin deficiency*
- *second-hand smoke*
- *air pollution (dust or chemicals)*
- *having repeated lung infections as a child*

Sometimes people with COPD feel guilty or ashamed. They think “I smoked, so I guess I brought this disease on myself.” People with COPD who feel ashamed or guilty might avoid seeing the doctor. They might be in denial about their symptoms. They might not reach out to get the help they need. This is a problem.

Everyone who feels sick deserves to feel better. Everyone with COPD deserves to get help. It doesn't help to think about the past and feel guilty. What's important is to think about today and tomorrow and the future. What can I do now to feel my best? How can I live the healthiest life possible?

A simple line drawing of a man with a white shirt and a dark sweater with a white spiral on it. He is pointing his right hand towards a large black speech bubble. The speech bubble contains white text.

It's hard to quit smoking,  
but it's the best way to prevent  
and slow the progression  
of COPD.

# How to Manage Your COPD

COPD can't be cured, but you can relieve some symptoms.

If you have COPD, you need to stay as healthy as you can. Your COPD will get worse over time, even with the best care. But you can do a lot to slow down the progression of COPD.

Begin by talking to your doctor. Your doctor will work with you to manage your COPD. Your treatment will depend on the stage your COPD is at, and what your symptoms are.

It's important for you to learn to manage your COPD yourself. You might see the doctor once a month or once in a while – but you have COPD all day every day. So you need to know what to do on your own. If you know what to do to take care of yourself, you can feel better and more in control. Of course, if your symptoms get worse, or if you have any questions or concerns, you should go to the doctor for help.

If you don't have a family doctor, try to get one. It's easier to manage a long-term disease like COPD if you get regular care from the same doctor. It's also important to work with a team of people who can help you manage your COPD. On page 35, we talk about your COPD team.

# The BreathWorks PRIME Plan to manage your COPD

To feel better with COPD, you have to work at it every day. By making healthy choices - not smoking, eating right, exercising – you can slow down your COPD. You can enjoy a more active, fun life. The trick is to work at it every day, not just when you feel horrible.

*These five steps will help you manage your COPD:*

- 1. Prevent and slow the progress of your COPD.**
- 2. Relieve your symptoms.**
- 3. Improve your health and get active.**
- 4. Make sure you prevent flare-ups, and treat flare-ups quickly** (a flare-up is when your COPD symptoms get worse).
- 5. Establish your COPD team.**

# 1

## Prevent your COPD from getting worse: QUIT SMOKING

If you've already stopped smoking, congratulations. You've done the best thing possible for your COPD. Quitting smoking is the very best way to prevent COPD and to slow it down if you already have it.

If you haven't yet quit smoking, now's the time to quit. It's never too late. By quitting, you prevent further lung damage. If you continue smoking, the damage will continue and you'll be more likely to have chest infections, coughing, and phlegm (mucus). The toxins and tar in cigarettes will continue to clog up your lungs, stopping your lungs' natural cleaning action.

Quitting is tough. It may be one of the toughest things you ever do. The good news is that there are people, programs and medicine to help you quit smoking. Your chance of success is highest if you combine quit smoking supports.

Each year thousands of people with COPD quit smoking. So can you. It's not easy, but quitting smoking is the single best thing you can do to improve your health and your quality of life.

Quitting smoking can be a major turning point in your life. Many people say quitting gives them a better sense of well-being and inspires them to make other healthy choices, like eating better and exercising more. Many smokers don't quit until they get diagnosed with COPD. A COPD diagnosis is a wake-up call. After they quit and start treating their COPD, many people feel much better than they have in years.



The decision to quit smoking  
is yours to make. No one else  
can make it for you.

# ASK THE BREATHWORKS COACH



## ***“I need help to quit smoking. Where can I get it?”***

If you want help to quit smoking, contact:

- **The Lung Association** – for information on quitting and referrals to quit programs in your area, call The Lung Association toll-free, at **1-866-717-COPD (2673)** or visit our website at **www.lung.ca/copd**
- **Your family doctor**
- **Your friends**
- **a local support group**

Your doctor may recommend medical treatments to help you quit smoking. These include:

**Nicotine replacement therapy**, such as the nicotine “patch” or nicotine gum. You can get these over-the-counter (without a prescription) at most pharmacies.

**Bupropion hydrochloride** and **varenicline tartrate**  
These are medicines that work on the “addiction centre” in the brain. They can reduce your craving to smoke. You need a doctor’s prescription for them.

Quitting smoking may be one of the hardest things you’ll ever do. But it gets easier with practice. Research shows that every time you try to quit, you boost your chances of quitting for good. Your chance of success is even higher if you combine quit methods like counseling, nicotine replacement (“the patch”) or other medications.



## Don't fall for:

- programs that promise “quick cures” or
- “light” or “low-tar” cigarettes as an alternative to quitting — they're as harmful as regular cigarettes

It's tough to quit if you don't have help. Most people have to try four or five times before they can quit for good. Keep trying. You're worth it! In fact, your life may depend on it.



## 2

## Relieve your symptoms

Breathlessness, cough, mucus and fatigue – all are symptoms of COPD. There are many ways you can prevent or relieve some of these symptoms. You can:

- *take medicine*
- *control your breathing and conserve your energy*
- *avoid things that trigger your COPD symptoms*

Medicines can help control COPD symptoms. Exercise and healthy eating can also make you feel better. If you're out of shape and eat poorly, you run the risk of increased breathlessness, cough and mucus. You want to be as healthy and as physically active as your lungs will allow.

You'll also want to avoid the things that cause breathing problems. Simple things, like a whiff of perfume or a blast of cold air, can trigger your COPD. For details on how to avoid these triggers, see page 22 of this guide.

### *Take COPD medicines*

Medications cannot cure COPD, but they can help relieve symptoms. Different types of medicines treat different symptoms. When your symptoms are under control, you'll feel better.

Sometimes, your symptoms may get worse – this is called a COPD flare-up. If you have a flare-up, your doctor may prescribe extra medicines to help you feel better.

To get the full benefit from your medications, you must follow the doctor's instructions. Some medicines are to take only when you need them, like your quick-relief bronchodilator. Other medicines must be taken regularly, every day. Take them as instructed by your doctor. If you're not sure about when or how to use your medications, ask your doctor, your pharmacist, or call the BreathWorks helpline.

Keep a list of all the medicines you take, and show it to your doctor and pharmacist. They can make sure you don't have any drug interactions.

## Here are the basic COPD medications you should know about:

- *bronchodilators – to relieve shortness of breath*
- *combination bronchodilators & anti-inflammatories – for prevention*
- *antibiotics – for fighting infection*
- *vaccines for flu and pneumonia – to prevent infections*
- *supplemental oxygen– a helper*

### **Bronchodilators**

If you have COPD, your main symptom is probably shortness of breath. You might get short of breath when you exercise, when you do chores, when you feel upset, or for no reason at all.

Bronchodilator medicines open up the airways (breathing tubes) in your lungs. When your airways are more open, it's easier to breathe. Bronchodilators can be inhaled or taken as a pill.

#### **The three main groups of bronchodilators are:**

- i. beta2-agonists*
- ii. anticholinergics*
- iii. xanthines*

#### **i) Beta2-agonists work to relieve breathlessness.**

Beta2-agonists are medicines you inhale. They come in two varieties: short-acting and long-acting. Short-acting beta2-agonists are often used as a “rescue” (“quick-relief”) medicine, to open airways quickly. They can also be taken on a regular basis.

#### **ii) Anticholinergics also work to relieve breathlessness, but in a different way than beta2-agonists.**

Anticholinergics are effective in treating COPD - especially if they are taken on a regular basis. Anticholinergics also come in two varieties: short-acting and long-acting. Anticholinergics are also medicines you inhale.

#### **iii) Xanthines are tablets that may help relieve breathlessness.**

Xanthines/ theophyllines are pills that can make your breathing muscles stronger and make your airways more open and less swollen.

**Doctors may prescribe more than one kind of bronchodilator to treat your COPD.**

## *Combination bronchodilators and anti-inflammatories*

If you have ongoing breathing problems and moderate or severe COPD, your doctor may prescribe a combination medicine. Combination medicines combine a bronchodilator that relieves shortness of breath, and an inhaled corticosteroid\* that brings down the swelling in your airways. Over time, combination medicines can help prevent COPD flare-ups.

Combination medications are “preventer” medications that need to be taken every day, usually twice a day. They come in inhalers. Combination medicines help over time, but they do not help right away. If you need help right away, take your quick-relief medicine, a bronchodilator like salbutamol (Ventolin, Airomir) or formoterol (Oxeze).

\*Note: Corticosteroids for COPD are **not** the same thing as the anabolic steroids some bodybuilders take to build muscle.

## *Antibiotics*

Some COPD flare-ups are caused by bacterial infections in your airways (breathing tubes). Antibiotics treat COPD flare-ups caused by bacteria. Different antibiotics kill different types of bacteria.

Many COPD flare-ups are caused by viruses. Antibiotics don't work on viruses, so you won't be able to use antibiotics if you have a viral infection.

Your doctor may give you an antibiotic prescription to have on hand and fill if you feel a COPD flare-up is coming on. Your doctor will give you a COPD action plan with clear directions on what to do and what medicine to take if you have a flare-up.

## *Vaccines for flu and pneumonia*

Vaccines can help protect you against specific strains of flu and pneumonia. Both types of vaccine can lower your chances of getting a flare-up. You need to take a “flu shot” every year, usually in the fall. Most people need to take the pneumonia shot once, but some people might need a second dose (a booster) - ask your doctor about this.

## *Supplemental oxygen*

If you have lung damage from COPD, it may be hard for you to get enough oxygen from the natural air. Low oxygen levels can make you short of breath and tired. If your blood oxygen level is very low, the doctor may prescribe you supplemental oxygen.

Not everyone who has COPD needs to be on oxygen. To find out if you need supplemental oxygen, speak to your doctor or Certified Respiratory Educator.

*To get the most from your medicines,  
you must take them as instructed by  
your doctor.*

# ASK THE BREATHWORKS COACH



***“How do I know if I’m taking my COPD medicines properly? They’re all so confusing.”***

Puffers, dry powder inhalers, spacers.... These are just three of the devices you might use to take your medicines. It is important to use your COPD inhalers and devices properly, so all your medicine gets to your lungs, where you need it. You will not get the full benefit of your medicines unless you take them properly.

Learning to take your medicines can be complicated. Begin by asking your doctor for a demonstration. And don't forget to ask your pharmacist to give you a demonstration too. Then, if you're still confused, keep on asking!

There's a good reason that you inhale so many of your COPD drugs. Inhaling medication directly into the lungs is the best way to take the medicine, and it means you'll have fewer side effects.

If you have questions about your medicines or their devices, ask your doctor, pharmacist, respiratory therapist, or a Certified Respiratory Educator from The Lung Association's BreathWorks Helpline at 1-866-717-COPD (2673).

## *Control your breathing and conserve your energy*

Many people with COPD want to do certain things but can't, because they are short of breath. There are ways to be less short of breath when you walk, talk, and exercise. You can:

- *Practice simple breathing techniques*
- *Clear your mucus (phlegm)*
- *Learn how to conserve your valuable energy.*

By following these steps, you can do more of the things you want to do.

The Lung Association website has diagrams and instruction that explain different breathing and coughing techniques. It also offers a section called “Living with COPD”, that gives advice on how to do chores with less effort, how to travel with COPD, how to garden with COPD, and more.

**Go to [www.lung.ca/copd](http://www.lung.ca/copd) for more information.**

You can also ask your doctor about breathing techniques, and for a referral to a pulmonary rehabilitation class that will teach you these techniques and other strategies for coping with COPD. For more details on pulmonary rehabilitation, see page 25 of this guide.

Remember, don't rush! Life is not a race. Take your time. Conserve your energy. Rest if you feel dizzy at any time. Rest between your tasks. Stress can make breathing difficult, so plan your activities ahead of time and try to keep stress to a minimum. You'll accomplish the things you want with less breathlessness.

# ASK THE BREATHWORKS COACH



## ***“How can I make sure the air I breathe won’t make my COPD symptoms worse?”***

Often, air pollution can trigger your COPD symptoms – it can make your symptoms worse. Here are some tips to make sure that you avoid air pollution and breathe the cleanest air possible:

### **Outdoor air**

If you live in an area that’s prone to smog, the simplest way to avoid dirty air is to stay inside during a smog alert, ideally in an air-conditioned place. Listen to the radio, watch television, and read the newspapers. When smog alerts appear, stay indoors, close your windows, and turn on the air conditioner. Make sure you stay cool, and make sure you drink water to stay well-hydrated.

Keep in mind that smog can happen at any time of year, not just in summer.

Also, avoid travelling in rush hour and avoid using underground parking. If you can, get someone to drop you off at the door.

### **Indoor air**

Keep your indoor air clean by making your home totally smoke-free. Air out your living environment. Keep fresh air moving throughout. Keep rooms clean and uncluttered. Dust often.

Try not to use chemicals in your home. Everyday things like paint, varnish, household cleaning products, hair-spray and perfume can trigger breathing problems. Avoid things with strong smells and perfume, and use natural cleaning products instead.

For more information on improving the quality of the air you breathe, contact The Lung Association at

1-866-717-COPD (2673).



## *Avoid triggers- things that make your COPD symptoms worse*

Many people with COPD notice that dusty or smoky air makes it harder for them to breathe. For other people, polluted air, cold air, humidity, or wind make breathing harder. Strong smells can also cause breathing problems.

As you live with your COPD, you'll figure out the triggers that irritate your breathing.





# 3

## Improve your health and get active

If you have COPD, you'll feel much better if you stay active. Exercising can help you breathe better and can give you more energy.

But it can be hard to get active if you have COPD. People with COPD are often tired. When you're tired, you feel like sitting around and doing nothing. Sitting still is tough on your body. It weakens your heart and lungs and reduces the fitness of your muscles. In the end, you feel even worse – you have less energy, you're more tired, and you're more short of breath. So you feel even less ready to get active. It's a trap – the less you do, the less you can do.

Thankfully, it's possible to break out of this trap and get moving.

### *Exercise regularly*

It pays to exercise. Regular exercise will help you get out of the trap of sitting still and feeling tired all the time.

When you're fit, you can supply enough energy to your lungs, arms and legs for all your daily activities. Your exercises don't have to be fancy or complicated, but you do have to exercise regularly. A good way to start exercising is to do stretching and breathing exercises and take a walk every day.

### *Join a pulmonary rehabilitation program*

A great way to learn how to exercise, and to get encouragement, is to join a pulmonary rehabilitation program. Pulmonary rehabilitation is strongly recommended for most people with COPD.

Pulmonary rehabilitation (also called respiratory rehabilitation or just rehab) is a special program for people with long-term lung diseases like COPD. It's usually led by a respiratory therapist, a nurse, or a cardio-pulmonary physiotherapist.

Rehab teaches people with COPD:

- *How to exercise – and it gives you a chance to practice exercising*
- *How to manage your COPD – it covers topics like nutrition, how to do chores with less effort, etc.*
- *How to do breathing and coughing techniques*

Pulmonary rehabilitation classes are usually fun, too- COPDers enjoy this chance to spend time together and encourage one another.

Full-scale pulmonary rehabilitation programs are usually offered at hospitals or clinics in larger cities. If you live in a smaller centre that doesn't offer pulmonary rehabilitation classes, there are some alternatives to try:

- *informal programs offered by smaller hospitals*
- *exercise maintenance programs*
- *nutrition classes at your local community centre*
- *a mall-walking club in a neighbourhood shopping centre*
- *an aqua-fit class at your local pool.*

Many people with COPD develop their own self-directed “rehab programs,” including activities they pursue on their own, often in their homes.

Joining a pulmonary rehabilitation program may require a referral from your doctor. Talk to your doctor to see if pulmonary rehabilitation is for you. Then call the BreathWorks Helpline at 1-866-717-COPD (2673) to see if there's a pulmonary rehabilitation program available in your area.

Before you begin any exercise program, talk with your doctor. Ask if using your bronchodilator medicine before exercising will help you exercise more easily. Also ask about breathing and coughing techniques that can help you as you're exercising.

## Eat well and keep your weight in check

Eating nutritious foods can help you feel better. If you eat unhealthy food, or if you don't eat enough, you can be low on energy. When you're low on energy, you don't feel like exercising, and your muscles get weaker. When your muscles are weak, it's harder to breathe. Good food can help you feel more energetic.

Some people with COPD are underweight. They find it tiring to chew, and eating makes them short of breath. So they eat less, and they don't get the nutrition or energy their body needs. If you are underweight, try easy-to-eat, high-calorie foods, as well as nutritional supplements. Try to eat many small meals each day, instead of a few large ones. Ask your doctor for a referral to a dietitian.

Some people with COPD are overweight. Being overweight can also cause problems for people with COPD. For example, if you have a large stomach, it can press against your diaphragm, a muscle that helps you breathe – this can make it harder to take a breath. People who are overweight should avoid unhealthy food and high-calorie drinks (pop, beer) and should try to exercise more. It's also helpful to see a dietician for advice on choosing healthy foods.

**Canada's Food Guide** is a good place to learn about healthy eating. It's a free guide put out by Health Canada, and it comes in many different languages. Ask for a copy from your doctor or your local health unit, look at the guide online, or call 1 800 O-Canada (1 800 622-6232) to order your free copy from Health Canada.

If you are concerned about the foods you eat or about your weight, speak to your doctor. Your doctor may be able to help you develop a plan for healthy eating or may refer you to a dietician.

## Enjoy and maintain sexual intimacy

Sexual intimacy is one of life's great pleasures. But it's a difficult topic for many people to discuss. Sexual intimacy - feeling loved and touched by another - is a key element of a complete relationship between two loving adults. Although COPD may make maintaining a full and healthy sex-life less straightforward than it otherwise might be, it does not mean the end of your sex life!

Plan to have sex at times when you're rested. If you eat a very large meal or drink a lot of alcohol before lovemaking, you could get breathless. Don't worry—your COPD medications won't interfere with sexual functioning. In fact, taking a dose of your quick-relief medicine (bronchodilator) before sex may reduce breathlessness. Use any sexual position that is comfortable and pleasurable for you and your partner. And go slowly - - don't rush!

## Take control and ask for help when you need it

Managing your COPD is all about helping yourself. You can do it. Find out all you can about the disease. Reading this guide is a good first step.

But as much as you need to help yourself, there will be times when you need to reach out to others. Don't be afraid to ask for help.

Plenty of organizations, starting with The Lung Association and its BreathWorks Program, are there to support you. BreathWorks is ready with help, advice and information. To find out what's specifically available near you, call The Lung Association toll-free, at **1-866-717-COPD (2673)** or visit our website at [www.lung.ca/copd](http://www.lung.ca/copd).

Stay connected! Loneliness and boredom can set in very quickly if you don't keep in contact with your friends and family. Joining a COPD support group, like those offered by The Lung Association, is a great way to meet new people and get encouraged and inspired.

Managing your COPD is all about helping yourself.

# 4

## Make sure you prevent and treat flare-ups

A flare-up is when your COPD symptoms get worse. Flare-ups are usually caused by:

- *a trigger - like air pollution or allergies , or*
- *a chest infection – from a virus (cold, flu, etc.) or from bacteria*

It's very important to prevent flare-ups and to treat them as soon as you can. Flare-ups are the main reason COPD patients go to hospital. They can be deadly.

Some symptoms of a COPD flare-up are more shortness of breath, more coughing, and more phlegm (also called mucus or sputum – often it turns green or yellow or gets thicker during a flare-up).

**In the battle against flare-ups, you need to know four things:**

- i. How to avoid a flare-up*
- ii. How to recognize the early-warning signs of a flare-up*
- iii. How to begin treatment for a flare-up*
- iv. When to call your doctor or go to the emergency department for treatment.*

### *i. How to avoid a flare-up*

To avoid a flare-up, you must take good care of yourself. This means you should:

- *take your medicines as directed*
- *eat right*
- *get enough sleep*
- *exercise*
- *stay away from people who are sick*
- *get your flu shot, and ask about getting a pneumonia shot*
- *wash your hands properly and often- see the steps to proper handwashing, below.*



### **Ask your doctor for a COPD flare-up action plan**

Always try to stay one step ahead of getting sick. Try to have your own family doctor, and go for regular check-ups. Talk to your doctor about creating a “plan of action” to deal with a flare-up. A flare-up action plan will tell you what to do and what medicines to take if you notice a flare-up coming on. This plan will also tell you when it’s time to go to your doctor’s office or the emergency department.



## *ii. How to recognize the early-warning signs of a flare-up*

You can often tell when a flare-up is about to begin. You might notice increased breathlessness, sore throat, cough, tiredness and cold symptoms.

If you catch your flare-up in time, it can be much easier to treat, and it can save you from having to go to the hospital. The key is to pay attention to the early-warning signs of a flare-up.

### **Early-warning signs of a COPD flare-up:**

- *mucus (phlegm) that is yellow, green or brown*
- *an increase in the amount, thickness or stickiness of your mucus (phlegm)*
- *a fever*
- *swollen ankles*
- *needing to sleep sitting up instead of lying down*
- *morning headaches, dizziness, trouble sleeping*
- *an unusual increase in shortness of breath*
- *feeling sick*

If you have any of these symptoms for longer than 24 hours, call your doctor right away. You may have an infection that requires medical treatment. If you can't reach your doctor, go to the nearest hospital emergency department.

### **More serious warning signs:**

- *Chest pain*
- *Blue lips or fingers*
- *Confusion*

If you notice any of these signs, don't wait. Call 911 or ask someone to take you to the nearest hospital emergency department.

### *iii. How to begin treatment for a flare-up*

Since COPD flare-ups can begin quite suddenly and unexpectedly, it's a good idea to have worked out a "plan of action" beforehand with your doctor. Your plan might involve keeping a supply of antibiotics or corticosteroid pills on hand, along with instructions from your doctor on how to use them if a flare-up starts. Your doctor might tell you to start taking antibiotics or corticosteroid pills at the first sign of a cold or infection. If that's the case, don't wait. Start right away. If you treat your flare-up as soon as possible, you're less likely to get seriously ill.

### *iv. When to call the doctor or go to the emergency department*

Some flare-ups will be minor, but others may be very serious. If you're having a flare-up and your medicines aren't working, or if you're getting worse, get help. Call your doctor. If your doctor isn't available, go to the nearest hospital emergency department. Follow the advice in your COPD Plan of Action.

**Take good care of yourself so you can avoid COPD flare-ups.**

# THE BREATHWORKS COACH SAYS

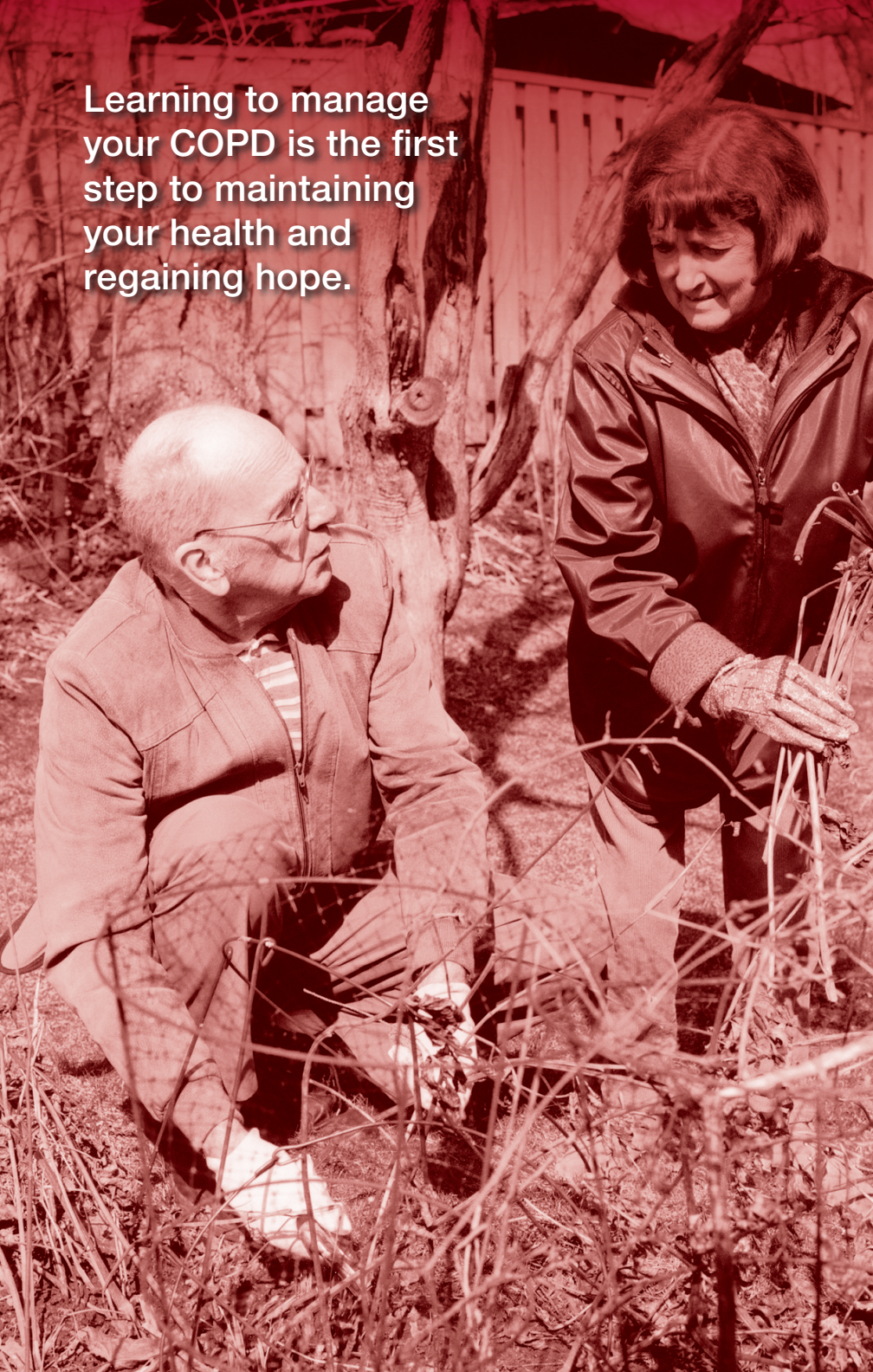
*Think about  
your future*



People with COPD may live a long time after they are diagnosed. Eventually, people with COPD may die from the disease, or from a complication of it.

If you have COPD, it's a good idea to think about the future. Go over the medical options with your doctor. Discuss your wishes with your friends and family- those people who may make decisions on your behalf if you are unable to do so. Prepare a "living will" to specify the medical treatments you would choose or refuse.

Learning to manage  
your COPD is the first  
step to maintaining  
your health and  
regaining hope.



# 5

## Establish your COPD team

It's hard to cope with COPD alone. You shouldn't have to.

Managing your COPD is a "team sport." The members of your team should include your family, your friends, and healthcare professionals.

Healthcare professionals on your COPD team may include:

- *your doctor - you may have a family doctor and a respirologist (a breathing specialist doctor)*
- *your nurse*
- *your pharmacist*
- *the respiratory therapist, nurse, or cardio-pulmonary physiotherapist who leads your pulmonary rehabilitation program*
- *a Lung Association BreathWorks COPD educator. The Lung Association offers a toll-free line that people with COPD and their families can call to get answers about COPD. A Certified Respiratory Educator with expertise in COPD will answer your questions free of charge. Call 1-866-717-COPD (2673).*

What to discuss with your COPD healthcare team:

- *all your symptoms, especially if they are getting worse*
- *what chores and activities you find the hardest*
- *what you can do to keep healthy: how to eat well, how to exercise, etc.*
- *what things trigger your COPD*
- *if you are using more of your quick-relief medicine than usual*
- *questions about your treatment*
- *concerns you may have about your medicines or their side effects*
- *what to expect in the future*

# Getting the Most from your Doctor's Visit - Advice for Better Communication

Doctors are often rushed. It helps if you make an extra effort to make sure you and your doctor understand each other. Here are some ways to improve communication with your doctor:

- *Prepare a written list of the questions you want to ask. Put the most important questions at the top of your list.*
- *Take notes as the doctor is answering your questions. If you don't understand the doctor's answers, ask for more details.*
- *Show the doctor a written list of all your symptoms. Be honest - tell the doctor all your symptoms.*
- *Bring along all the medicines you are taking - your COPD medicines, and whatever other pills or herbal medicines you take.*
- *If you're not sure you're taking your medications correctly, ask the doctor. Show the doctor how you take your medicine, and ask if it's the right way.*
- *Bring a friend or relative to your appointment. That person can help you understand and remember the details. They can also take notes for you.*
- *Ask the doctor about programs in your community that help people with COPD.*
- *Ask about joining a pulmonary rehabilitation program.*
- *If you get home from your doctor's visit and realize you missed a question or don't understand something the doctor told you, phone the doctor's office right away. Ask the nurse or doctor to explain things to you.*

The Lung Association's BreathWorks Program is ready to help you every step of the way. Make us a part of your team! Call our Certified Respiratory Educators free, at **1-866-717-COPD (2673)** or visit our website at **[www.lung.ca/copd](http://www.lung.ca/copd)**.

# Keep in Touch

By reading this guide, you've taken an important first step: you've learned more about COPD. Congratulations!

To live your life to the fullest, you know you've got to manage your COPD. To do that, you might need more information about the disease. Maybe you want to learn more about exercise, medications, or breathing techniques. Whatever you need, we're here.

We'd be happy to send you other free COPD resources and pamphlets, or to answer your questions by phone.

To ask about our full list of COPD resources, or to speak with a Certified Respiratory Educator, call the free BreathWorks Helpline, at **1-866-717-COPD (2673)** or visit our website at **[www.lung.ca/copd](http://www.lung.ca/copd)**.

The Lung Association understands **COPD (Chronic Obstructive Pulmonary Disease)**. We are Canada's most trusted source of lung information. In 1900, we began our successful fight against tuberculosis. Our annual Christmas Seal Campaign funds important research and community programs. We work with thousands of Canada's leading doctors, scientists and health care workers – as well as patients – to bring you the information you need about lung diseases.



When you can't breathe, nothing else matters.

BreathWorks FREE Helpline: **1-866-717-COPD (2673)**  
Staffed by Certified Respiratory Educators

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

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