1. What is COPD?

The letters COPD are for chronic obstructive pulmonary disease. This is lung disease that worsens over time. With COPD, airways are narrowed and blocked. The lungs are damaged.

Most cases of COPD are due to one or both of these problems:

- Chronic bronchitis. This causes swelling and the build-up of mucus in the lungs.
- Emphysema. This damages the walls of the air sacs in the lungs.

Having COPD makes it hard to breathe in and out. In the U.S. and throughout the world, COPD is a major cause of illness and death.

2. Causes

- Smoking. This is the main cause. More than 90 percent of people with COPD are smokers or former smokers.
- Breathing in other lung irritants over a long period of time. These include air pollution and dust or chemicals used in the mining and textile industries.
- In some rare cases, having a genetic disorder called Alpha-1 antitrypsin deficiency. This is due to a defective protein in the blood.

3. Signs & Symptoms

- A chronic cough. The cough brings up mucus or phlegm.
- Shortness of breath. This is usually worse with exercise or when you exert yourself.
- Feeling like you can’t take a full, deep breath
- Chest tightness
- Wheezing. This is a whistling sound when you breathe.
- Frequent colds and other respiratory infections
- Swelling in the legs, ankles, and feet

Symptoms of COPD usually start after 40 years of age and slowly worsen over time.

4. Diagnosis

COPD is usually diagnosed with a breathing test called spirometry. Spirometry measures how much air your lungs can hold and how fast you can blow air out of your lungs. It is a simple and fast test. Your doctor or nurse technician will ask you to take a deep breath and then breathe out as hard and as fast as you can into a mouthpiece. The spirometer will measure and record the results.

A chest X-ray or CT scan can also diagnose COPD. Sometimes, a blood sample is taken to test levels of oxygen and carbon dioxide in the blood.

5. Prevention

The best way to prevent COPD is to not smoke. If you smoke, commit to quit! Talk to your doctor about over-the-counter or prescribed medications that can help you quit.

To increase your chances of success, take part in a stop smoking class or program.

6. Reasons to Call Your Health Care Provider

- You have a much harder time catching your breath.
- You have sudden tightness in your chest.
- You cough a lot more, it becomes difficult to cough, or you cough up yellow, green, brown or red-colored mucus.
- You have a fever.
- You have heart palpitations or a faster pulse than usual.
- You have a sudden increase or loss of appetite.
- You have blurry vision or see double.
- You become unusually dizzy or sleepy or you can’t think clearly.
- You are anxious or depressed.

7. Reasons to Get Emergency Care

- Your lips or fingernails are blue or gray.
- It is hard for you to talk or walk.
- Your breathing is fast and hard, even after taking medicine.
- Your heart is beating very fast or irregularly.

You can get help to quit smoking from:

- 1-877-44U-QUIT (448-7848)
- 1-888-QUIT-NOW (784-8669)
- www.lungusa.org
- www.smokefree.gov

- Avoid secondhand smoke and other lung irritants.
- If you work in an at-risk industry, wear protective clothing and equipment. Follow the safety measures of your workplace.

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Permafold® Topics

1. What is COPD?
2. Causes
3. Signs & Symptoms
4. Diagnosis
5. Prevention
6. Reasons to Call Your Health Care Provider
7. Reasons to Get Emergency Care
8. Treatment
9. Self-Care
10. Reasons to Call Your Health Care Provider
11. Reasons to Get Emergency Care

Reviewed and Approved by the Senior Medical Advisory Board

This Permafold® is not meant to take the place of expert medical care or treatment. Follow your doctor's or health care provider's advice.
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• You have had a stroke or heart attack.
• You have heart palpitations or a faster pulse than usual.
• You have a sudden increase or loss of appetite.
• You have blury vision or see double.
• You become unusually dizzy or sleepy or you can’t think clearly.
• You are anxious or depressed.

• Your lips or fingernails are blue or gray.
• It is hard for you to talk or walk.
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Before you travel, ask your doctor how to have your oxygen needs met. Discuss where you plan to go and work with your health care provider to develop and follow a treatment plan to meet your needs.

Your doctor may prescribe oxygen therapy if oxygen levels in your blood are too low. Oxygen is provided by an oxygen cylinder or concentrator and delivered through a nasal tube. It can help you be more active by an oxygen cylinder or concentrator and delivered through a nasal tube. It can help you be more active.

Your doctor may need a letter from your doctor or copies of your oxygen prescription, so check with the airline for rules about traveling with oxygen.

If you are ill or over-tired, you may need a letter from your doctor about:

- Manage your coughing.
- Avoid buttoned collars or ties.
- Wear ear slip-on shoes instead of buttoned shoes with laces or buckles.
- Wear clothes that don’t restrict your back.
- Avoid fried, greasy, or work that involve dust and other irritants. Use a filter mask.
- Avoid fried, greasy, and free foods. Foods, like fresh oranges, bananas, and tomatoes.
- Do not take over-the-counter cough or other medicines unless your doctor tells you to. Your health care provider can teach you techniques for coughing comfortably and productively.
- Relax. Close your mouth. Breathe in through your nose. Do this slowly and count: one, two, three, and four.
- Purse your lips like you are going to whistle. Breathe out slowly and count: one, two, three, and four.
- Manage stress.
- Emotional Support.
- Many people who have COPD also deal with depression, anxiety, and low self-esteem. Some programs offer emotional support, group counseling, and/or relaxation training.
- Keep your home well-ventilated.
- Do not use amoxil, amoxicillin, or penicillins.
- Inhaled steroids
- Anticholinergics
- Pulmonary Rehabilitation

You work with a team of health care providers to create a personal treatment plan and learn to manage your COPD to live a more normal life. Pulmonary rehabilitation includes:

- Exhale. This strengthens your muscles and improves your endurance. It makes it easier for you to move, do activities, and take care of yourself. You will find out how often to exercise, for how long, and how hard to push yourself.
- Emotional Support. Many people who have COPD also deal with depression, anxiety, and low self-esteem. Some programs offer emotional support, group counseling, and/or relaxation training.
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- Do not do this tight-lipped.

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9. Self-Care

Quitting smoking! This is the most important thing you can do to manage your COPD.

Stay active. Exercise can improve your strength and endurance. Ask your doctor about:

- Don’t smoke.
- Control household triggers, such as dust. Wear a filter mask when you vacuum, dust, and do hobbies or work that involve dust and other irritants. Use a lamp (not dry) for dusting.
- Keep your home well-ventilated.
- Do not use aerosol, ammonia, kerosene, powders or sprays. Find out about products that are safe for you and the environment at Indoor Air Quality (IAQ) House at www.epa.gov/iaq/www vaisa.gov.
- Stay inside when air quality is poor. Find Air Quality Index forecasts at www.airnow.gov. 

Work with your health care provider’s advice regarding use for air filters and air purifiers.

Manage your coughing.

- Do not take over-the-counter cough or other medicines unless your doctor tells you to. Your health care provider can teach you techniques for coughing comfortably and productively.
- Unless you are told by your doctor to limit your fluids, drink at least 8 glasses of water a day to keep mucous thin and easier to cough up.

Practice pursed lip breathing to relieve shortness of breath:

- Relax. Close your mouth. Breathe in through your nose. Do this slowly and count: one, two, three, and four.
- Purse your lips like you are going to whistle. Breathe out slowly and count: one, two, three, and four.
- Do not do this too tightly.

Stay active. Exercise can improve your strength and endurance. Ask your doctor about:

- Exercise.
- Do not take over-the-counter cough or other medicines unless your doctor tells you to. Your health care provider can teach you techniques for coughing comfortably and productively.
- Unless you are told by your doctor to limit your fluids, drink at least 8 glasses of water a day to keep mucous thin and easier to cough up.

Exercise can improve your breathing and make it harder to cough up mucus. Ask your doctor if and how much alcohol you should drink.

Eat healthy foods. Eat 2 or 3 small meals a day. Add” snacks” and avoid large gaps between meals, as needed.

- Avoid fried, greasy, and gas-forming foods (beans, onions, cabbage, etc.).
- Drink water throughout the day. Fidget help keep mucus thin and easier to cough up.
- Limit salt and sodium. Too much sodium can cause you to retain fluids that may interfere with breathing.
- Cook with herbs and spices instead. Choose low sodium, reduced-sodium, and sodium-free foods.
- Potassium helps maintain the body’s fluid balance and keeps your nerve, and heart function. Good sources of potassium include oranges, bananas, potatoes, spinach, asparagus, strawberries, and tomatoes.
- Eat plenty of fiber-rich foods, like fresh fruit, vegetables, and whole-grain breads, cereals and pasta. Fiber helps your body’s digestive system and may control blood glucose and reduce your cholesterol levels.
- Alcohol is a source of “empty calories” which make you feel full without providing valuable nutrients. Drinking alcohol may slow your breathing and make it harder to cough up mucus. Ask your doctor and how much alcohol you should drink.