

Chronic Obstructive Pulmonary Disease (COPD)

What is COPD?¹

Chronic obstructive pulmonary disease, or COPD:

- Refers to a group of diseases that cause airflow blockage and breathing-related problems
- Includes emphysema and chronic bronchitis.

Causes

According to the Centers for Disease Control and Prevention, in the U.S., key factors in the development and progression of COPD include:

- Tobacco smoke²
- Exposure to air pollutants in the home and workplace
- Genetic factors
- Respiratory infections

To help reduce your risk of developing COPD, avoid:

- Tobacco smoke
- Home and workplace air pollutants
- Respiratory infections



Symptoms

Symptoms of COPD include:

- Excess phlegm, mucus, or sputum production
- Frequent coughing or wheezing
- Shortness of breath
- Trouble taking a deep breath

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Complications

People with COPD, compared to adults without COPD, are more likely to:³⁻⁷

- Be unable to work
- Have activity limitations like difficulty walking or climbing stairs
- Have depression or other mental or emotional conditions
- Have increased confusion or memory loss
- Have more emergency room visits or overnight hospital stays
- Have other chronic diseases like arthritis, congestive heart failure, diabetes, coronary heart disease, stroke, or asthma
- Need special equipment like portable oxygen tanks
- Not engage in social activities like eating out, going to places of worship, going to group events, or getting together with friends or neighbors
- Report a fair or poor health status

Diagnosis⁸

A doctor can use a simple test, called spirometry, to:

- Measure pulmonary (or lung) function
- Detect COPD in anyone with breathing problems

Early detection may change its course and progress.

Treatment⁹

COPD treatment:

- Requires a careful and thorough evaluation by a physician.
- Can alleviate symptoms, decrease the frequency and severity of exacerbations, and increase exercise tolerance

When discussing treatment, your healthcare provider may ask you to:

- Avoid tobacco smoke and other air pollutants at home and at work
- Consider pulmonary rehabilitation, which is a personalized treatment program that teaches COPD management strategies to improve quality of life
- Quit smoking
- Take medication
- Take steps to avoid lung infections
- Use supplemental oxygen

Sources

1. “Chronic Obstructive Pulmonary Disease (COPD),” Centers of Disease Control and Prevention, last accessed October 20, 2021, <https://www.cdc.gov/copd/basics-about.html>.
2. Centers for Disease Control and Prevention, “Annual Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses—United States, 1997–2001,” *Morbidity and Mortality Weekly Report* 54 (2005, no. 250): 625–628.
3. Kurt J. Greenlund et al., “Association of Chronic Obstructive Pulmonary Disease with Increased Confusion or Memory Loss and Functional Limitations among Adults in 21 States, 2011 Behavioral Risk Factor Surveillance System,” *Preventing Chronic Disease* 13 (2016): 150428, doi: <http://dx.doi.org/10.5888/pcd13.150428>.
4. Y. Liu et al., “The Association of Chronic Obstructive Pulmonary Disease, Disability, Engagement in Social Activities, and Mortality among US Adults Aged 70 Years or Older: 1994–2006,” *International Journal of Chronic Obstructive Pulmonary Disease* 9 (2014): 75–83.
5. A.G. Wheaton et al., “Chronic Obstructive Pulmonary Disease, Hospital Visits, and Comorbidities—National Survey of Residential Care Facilities, 2010,” *Journal of Aging and Health* 27 (2015): 480–499.
6. T.J. Cunningham et al., “Association of Self-Reported Cigarette Smoking with Chronic Obstructive Pulmonary Disease and Co-morbid Chronic Conditions in the United States,” *COPD* 12 (2015) 276–286.
7. A.G. Wheaton et al., “Employment and Activity Limitations among Adults with Chronic Obstructive Pulmonary Disease—United States, 2013,” *Morbidity and Mortality Weekly Report* 64 (2015, no. 11): 290–295.
8. A. Qaseem et al., “Diagnosis and Management of Stable Chronic Obstructive Pulmonary Disease: A Clinical Practice Guideline Update from the American College of Physicians, American College of Chest Physicians, American Thoracic Society, and European Respiratory Society,” *Annals of Internal Medicine* 155 (2011): 179–191.
9. A. Qaseem et al.

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