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Chronic Obstructive Pulmonary Disease (COPD)

In chronic obstructive pulmonary disease (COPD), the airways in your lung lose their normal shape and elasticity and can become inflamed. The result is that the airways are less efficient at moving air in and out of your lungs, causing breathing difficulty, and leads to other systemic problems.

Although smoking is a primary risk factor for developing COPD, nonsmokers can get it too. Genetic factors and the inhaling of toxic substances can play a role.

The most common types of COPD are:

- Chronic bronchitis—a chronic inflammation of the medium-size airways, causing a persistent cough that produces sputum (phlegm) and mucus for at least 3 months per year in 2 consecutive years.
- Emphysema—a condition in which small air sacs in the lungs called "alveoli" are damaged. The body has difficulty getting all of the oxygen it needs, resulting in shortness of breath ("dyspnea") and a chronic cough.

Over time, COPD leads to greater and greater decline in physical function, partly because of increased shortness of breath (dyspnea) and loss of muscle. There are 4 stages of COPD—mild, moderate, severe, and very severe—based on measurements of the amount or flow of air as you inhale and exhale.

In addition to causing breathing difficulty, COPD results in cough, sputum production, and other symptoms. The disease can affect the whole body and lead to:

- Weakness in the arms and legs
- Balance problems and increased risk of falls
- Nutritional problems (weight loss or gain)

HOW A PHYSICAL THERAPIST CAN HELP

Your physical therapist will perform an evaluation that includes a review of your history, medications, and lung function test results. They will also assess your symptoms, and perform muscle strength, walking, and balance tests. Your physical therapist will be part of your pulmonary rehabilitation team and work with you to improve:

- Your ability to be physically active
- Your breathing during activity
- Your balance



COPD is the 4th leading cause of death in the US.

