



10th in a continuing series supporting chronic disease management

## Butt out!



In Canada, smoking is the cause of about 80–90 per cent of cases of chronic obstructive respiratory disease (COPD). The role of smoking in COPD is very clearly established. It is also strongly believed that exposure to second-hand smoke contributes to the development of COPD.

## Living with COPD

Respiratory diseases can affect people of all ages—children, teens, adults and seniors. Most of these diseases are chronic in nature and all have a major impact not only on the person with the disease, but also on their family, the community and our healthcare system.

One of the most common respiratory diseases is chronic obstructive pulmonary disease (COPD). COPD can affect every aspect of life, including the ability to work and enjoy daily activities.

Consequently, this condition is fast becoming a crucial health issue that requires more education and information for both the consumer and healthcare professionals.



COPD causes lung irritation and damage. Smoking is the leading cause of the disease, accounting for 80–90 per cent of cases. This makes smoking cessation the single most effective way to prevent and slow the progression of COPD.

The good news is that it can be prevented and managed. With *continued on page 2*

## Facts to know

1. COPD is the new name for emphysema and chronic bronchitis.
2. More than 750,000 Canadians suffer from this disease.
3. Fifty-seven per cent of those with COPD are women.
4. Female mortality due to COPD has risen to double that of breast cancer.
5. COPD is expected to be the third leading cause of death worldwide by 2020.

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# Take a breath: A closer look at COPD

COPD includes chronic bronchitis and emphysema, and it is important to point out that many individuals have both bronchitis and emphysema. This condition is typically characterized by an obstructed airflow.

COPD slowly damages the airways that carry your breath in and out of your lungs, causing the breathing tubes to become swollen and partly blocked by mucus. This results in damage to the tiny air sacs at the tips of your airways, making it hard to move air in and out of your lungs.

## Symptoms and diagnosis

The main symptoms of COPD are a long-lasting cough, coughing up mucus and shortness of breath. Doctors diagnose this medical condition by testing the lungs. They often use a simple test called spirometry, which measures how much air you can move out of your lungs.

## Treatment options

There is no cure, but there are many good treatments. The obvious lifestyle changes are to quit smoking and stay away from smoke and air pollution. But there are also other ways to temper the symptoms. For instance, treatments such as pills, inhalers (puffers) and supplemental oxygen can help once you or your loved one has been diagnosed. In addition, joining a pulmonary rehabilitation program—a special class that teaches exercise and COPD management—can be a great way to find support. If you or your loved one has this condition, consider these other steps for managing symptoms:

## Living with COPD

*continued from cover*

early diagnosis and appropriate treatment, you or your loved ones living with the disease should expect to experience less shortness of breath, better exercise

- Learn to recognize and treat COPD flare-ups.
- Make lifestyle changes to save energy and feel better: simplify chores, eat well and get plenty of rest.
- Use special breathing techniques when you're short of breath. You can find out about these from your healthcare professional.\*

## Prevention is possible

Thankfully, most cases of COPD can be prevented. Often, it is as easy as simply stopping smoking and staying away from second-hand smoke and other air pollutants.

## Controlling flare-ups

A flare-up happens when COPD symptoms (shortness of breath, cough and mucus) get worse or when new symptoms develop and is one of the main reasons people are hospitalized. Learning how to avoid flare-ups is an important part of managing the disease, especially if you are caring for someone with COPD. Fortunately, there are many things you can do to avoid a flare-up:

- Try to eat healthily and get enough sleep.
- Take all of the medications prescribed by your doctor.
- Talk to your doctor about creating an action plan to deal with potential flare-ups. A written plan will help you to know when you need to make an appointment to see your doctor and when to go to the emergency department.
- Many people with COPD find that being around certain things can set off their symptoms. Try to avoid triggers such as breathing very cold or very humid air.

tolerance, fewer hospitalizations and an overall improved quality of life. Through contemporary advances in medicine, and by modifying their behaviours, many people have learned how to deal with their COPD and are living satisfying and relatively active lives.



## Warning signs

Even with the best efforts, flare-ups can still occur. The quicker you can treat a flare-up, the better the chance of avoiding serious illness or a hospital stay. This is why it is so important to recognize the warning signs, such as the following, in yourself or your loved one:

- Mucus that is yellow, green or brown
- An increase in the amount, thickness or stickiness of mucus
- Chest pain
- Fever
- Ankle swelling
- Needing to sleep sitting up instead of lying down
- Morning headaches, dizziness, trouble sleeping or confusion
- Blue lips or fingers
- An unusual increase in shortness of breath
- A general feeling of ill health

If you notice any of the above signs, call your doctor right away or immediately go to the hospital emergency department.

## \*Pursed-lip breathing

Pursed-lip breathing is one of many breathing techniques that can be used to treat COPD flare-ups.

1. Breathe in slowly through your nose for one count.
2. Purse your lips as if you are going to whistle.
3. Breathe out gently through your pursed lips for two slow counts (breathe out twice as slowly as you breathed in). Let the air escape naturally—don't force the air out of your lungs.
4. Keep doing pursed lip breathing until you're no longer short of breath.

# Mitigating and managing risk factors

The two most important hazards for chronic respiratory diseases are tobacco smoke and indoor and outdoor air quality. Exposure to second-hand smoke affects all Canadians, causing cancer in non-smokers, sudden infant death syndrome in newborns and worse symptoms in those with asthma or COPD. All Canadians are affected by the quality of the air they breathe. However, the effects are more severe in those with lung disease.

Your lungs do amazing work every day. Healthy lungs supply large amounts of oxygen to your blood and allow you to work, play and live well. They also remove carbon dioxide and other waste products that your body doesn't need. There are many things you can do to keep your lungs healthy and disease-free.

## Quitting ain't easy

If you smoke, get help quitting. And if you're a non-smoker, don't start. Smoke from cigarettes, cigars and pipes contains over 4,000 harmful chemicals—50 of which are known to cause cancer. It's never too late to reap the health benefits of going smoke-free. Quitting smoking isn't easy, but there is a lot of help available. Here are some tips from the Canadian Lung Association:

1. Pick a quit day—and stick to it!
2. Choose two or more proven

methods—like the patch or gum—to help you on your way. Find out which works best for you.

3. On your quit date, butt-out completely—that means no smoking at all.
4. If you slip up, don't give up. Try again! It can be very hard to stop using cigarettes. But if you keep trying, you'll eventually succeed.

## Avoid second-hand smoke

Second-hand smoke is a complex mix of chemicals produced by burning tobacco. Two-thirds of the smoke from a cigarette isn't inhaled by the smoker, but enters the air around the smoker. Here are three tips to stay second-hand smoke-free:

1. Don't allow smoking in your home, car or workplace.
2. Put up "no smoking" signs in your home, car and workplace.
3. Support businesses and activities that are smoke-free.

## Be aware of air pollution and do your part to keep the air clean

Indoor and outdoor air pollution can cause health problems, especially for people with lung disease. It can irritate, inflame or destroy lung tissue and even low levels of air pollution can cause health problems. There are many things you can do to keep the air clean both indoors and out:

### • Outside

- Turn your car engine off, rather than letting it idle.
- Keep an eye on your local air-quality index and stay indoors when it's bad.
- Don't use pesticides or other chemicals on your lawn and garden.
- Use public transit.
- Support laws that aim to improve air quality.

### • Inside

- Control moisture in your home. Use exhaust fans in bathrooms and kitchens.
- Maintain home appliances. Have major appliances regularly inspected and cleaned by a professional.
- Clean surfaces. Keep moist areas clean and dry.
- Control dust (especially if you're allergic to animal dander and mites). Always wash bedding in hot water (at least 54.5°C or 130°F).

## Living life to the fullest

Many people with COPD enjoy a happy and productive life. If you or your loved one has COPD, it's important to learn how to manage independently. That being said, it is equally if not more crucial to reach out for help and support when you need it. Discuss treatments and approaches with your care team and prepare now to maintain your quality of life in the future.

## Test your breath!

If you answer yes to any one of the following questions along with the smoking question, you may have developed COPD. Even if you have had no symptoms but you are over 40 years old with a history of smoking, you should still ask your doctor for a spirometry test.

- |  |  |
|--|--|
| <input type="checkbox"/> Are you, or were you, a smoker?   | <input type="checkbox"/> Do you wheeze?  |
| <input type="checkbox"/> Do you have a chronic cough? (Note: Some people with COPD rarely cough.)  | <input type="checkbox"/> Do you get short of breath easily?  |
| <input type="checkbox"/> Do you have sputum production when you cough and the cough doesn't go away? (Note: Some people with COPD do not produce mucus.) | <input type="checkbox"/> Do you get a lot of chest colds?  |
|  | <input type="checkbox"/> Compared to others of your age and sex, do you get "winded" or short of breath more quickly when walking or exercising? |



### Asking the right questions

If you or a loved one has taken the Canadian Lung Health Test (visit [www.lung.ca](http://www.lung.ca)) and suspects that COPD is a possibility, consider these points when you visit your doctor:

1. Make a list of the symptoms and how long they have been going on.
2. Jot down all personal and family medical history .
3. Make a list of any current medicines, remedies and vitamins you or your loved one is taking.
4. Write down any questions before you go so that you don't forget them.
5. If it is not suggested, ask for a spirometry test.

Source: [www.copdcanada.ca](http://www.copdcanada.ca)

**For more information on respiratory diseases, visit these websites:**

- [www.lung.ca](http://www.lung.ca)
- [www.copdcanada.ca](http://www.copdcanada.ca)
- [www.asthma.ca](http://www.asthma.ca)
- [www.lungcancerCanada.ca](http://www.lungcancerCanada.ca)

## Ask our experts

*Forward your questions or comments, and we'll ask our experienced nursing team to provide you with the latest advice and information.*

*My mother is on oxygen therapy and often has a very low energy level during the day. She occasionally forgets to take her medications as well, so I'm afraid to leave her alone. Would a home healthcare provider be able to help us?*

A home healthcare provider such as a personal support worker would be able to assist your mother in many ways. She would remind your mother to take her medications and ensure that the oxygen is on, as well as helping your mother with her activities of daily living, such as bathing and laundry, in order to preserve her energy. Another member of the team, a registered nurse, would also be able to help your mother by coaching her on ways to obtain the maximum amount of independence with the minimal amount of exertion. For example, having a chair in the shower or bath.

*My brother has just been diagnosed with COPD. How can a respiratory therapist or nurse help? I'm told he will need a care plan.*

Now that your brother has been diagnosed with COPD, he will need some assistance in learning about treatment options, exercise programs and general

*This information was taken with permission from the Ontario Lung Association website, at [www.on.lung.ca](http://www.on.lung.ca), and the Canadian Lung Association website, at [www.lung.ca](http://www.lung.ca). Visit their websites for this and more on COPD and lung disease.*



rehabilitation related to living with COPD. The Canadian Lung Association website ([www.lung.ca](http://www.lung.ca)) has some excellent resources. In addition, a respiratory therapist will create a care plan to guide your brother to the best program for him in order to maximize his ability to live well with COPD.

For a copy of the We Care Independent Living Guide, call 1-800-605-0916 or visit [www.wecare.ca](http://www.wecare.ca) to find the We Care office nearest you.

### Attention caregivers

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Send your questions to Julia Sommers at [julia\\_sommers@wecare.ca](mailto:julia_sommers@wecare.ca)



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