



**The Asthma Foundation of Queensland**

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## Chronic Obstructive Lung Disease & Shortness of Breath

Are you coughing or wheezing? Is it becoming increasingly hard to breathe? Is physical activity difficult? Are you becoming anxious and frustrated with shortness of breath?

You may have chronic bronchitis, emphysema, asthma, or a combination of these conditions. Your doctor may have used names like COAD (Chronic Obstructive Airways Disease) or COPD (Chronic Obstructive Pulmonary Disease).

### Bronchitis

*Bronchitis* is inflammation (redness and swelling) of the small airways in the lungs. Swelling of the small airway lining may block the airway, making it harder to breathe. Excess mucus (which is easily infected by bacteria) is produced in the airways. This causes coughing and a lot of the mucus may be coughed up. This process can largely be reversed with treatment.

Most adults have a bout of *acute* or short-term bronchitis at some time in their lives. Normally this lasts a week or two at the most. People with *chronic* bronchitis produce a lot of mucus. They cough and may be short of breath for months or even years. Chronic bronchitis is not as easily treatable and tends only to be managed with medication. If chronic bronchitis has been acquired through smoking, quitting is essential to preventing worsening of the condition.

### Emphysema

In *emphysema*, the air sacs in the lungs are gradually destroyed. This makes it difficult for the lungs to absorb enough oxygen from the air into the blood. As the air sacs are destroyed, the small airways lose their support and function. They become blocked and are no longer able to provide an adequate air supply. Emphysema cannot be reversed, however stopping smoking can significantly slow the progression of the disease. Physical activity can help to maintain quality of life.

### Asthma

People with *asthma* have sensitive airways in their lungs. When exposed to certain triggers (e.g. pollens, dust), their airways narrow. This is due to inflammation, mucus production and tightening of the muscle around the airways. Medication can reverse the narrowing and inflammation of the airways and dry up the mucus in the lungs. Smoking also worsens asthma and makes the medication less effective. Quitting smoking can help to improve your asthma management.

### Diagnosis

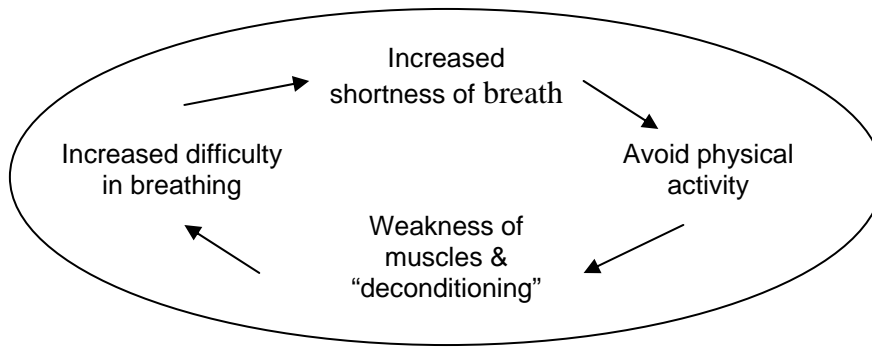
The doctor may order spirometry (a lung function test which measures breathing) and a chest x-ray to diagnose your problem.

People often reduce their activities to lessen episodes of shortness of breath. A vicious cycle begins to develop, leading to less activity, a decreased fitness level and as a result, greater shortness of breath.

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### Tips to improve life if you are short of breath

1. Be well informed. Learn as much as you can about your condition and how you can manage
2. Understand your medications and use them according to your doctor's advice.
3. Discuss all your medications (prescription and over-the-counter) with your doctor to ensure they are compatible. Some medications taken for other conditions can make your shortness of breath worse.
4. Quit smoking. Smoking contributes to the development and worsening of lung conditions. Call the Quitline on 131 848 or see your doctor for help and support.
5. Physical activity should be part of your daily routine. Remaining active helps to keep you fit and may help you to better cope with shortness of breath. Ask your doctor or physiotherapist for advice on suitable activities.
6. Breathing exercises, including breath control, can be helpful. Ask your doctor or physiotherapist for advice.
7. Adequate nutrition is essential. Ask your doctor or a dietitian for advice.
8. Ensure that your general health is under control. Regular influenza ('flu) and / or pneumovax vaccinations are recommended.
9. Join your local LungNet Support Group. Meet people with similar conditions and find out how they have managed to be in control. Call The Australian Lung Foundation on 1800 654 301 to find out if there is a support group in your area.
10. Some hospitals and community health centres have Pulmonary Rehabilitation programs for people with chronic lung conditions. Call The Australian Lung Foundation on 1800 654 301 for up-to-date information on available programs. (Please note that Pulmonary Rehabilitation programs are only available in limited areas)

For further information on COPD, contact:

- LungNet at The Australian Lung Foundation 1800 654 301.
- The respiratory clinic at your major hospital

For more information contact The Asthma Foundation of Queensland on 1800 645130 or e-mail [info@asthmaqld.org.au](mailto:info@asthmaqld.org.au)

*Disclaimer: This sheet is for information only and should not be used in place of medical advice.*

*The Asthma Foundation of Queensland – November 2008*