
Information for Behavioral Health Providers in Primary Care

Chronic Obstructive Pulmonary Disease (COPD)

COPD

- COPD is a lung disease that makes it hard to breathe.
- COPD is caused by damage to the lungs over many years, usually from smoking or exposure to breathing chemical fumes, dust, or air pollution.
- COPD is diagnosed based on symptoms and lung function (spirometry) test.
- COPD is caused by two major diseases:

Chronic Bronchitis. Airways that carry air to the lungs (bronchial tubes) get inflamed and make a lot of mucus. This can narrow the airways, making it hard to breathe.

Emphysema. Tiny air sacs that in a healthy person act like a balloon and get larger and smaller as you breathe in and out have been damaged and lose their stretch. Less air gets in and out of the lungs creating shortness of breath.

Symptoms of COPD:

Long-lasting (chronic) cough.

Mucus that comes up with the cough.

Shortness of breath that gets worse during exercise

Symptoms may suddenly flare up and get worse. This is known as COPD exacerbation and can range from mild to life-threatening.

Terms to know:

Spirometry test

Measures how much air can a person breathe out compared to a person without COPD.

COPD Information Sheet (continued)

Measured as amount of air a person can breath out in one second (forced expiratory volume, or FEV) and the amount of air a person can breathe out after taking a deep breath (forced vital capacity, or FVC).

Stages of COPD:

Stage 1 (Mild). Chronic cough that often brings up mucus from the lungs. Impaired lung function of 80% of predicted value. Person may not have significant symptoms.

Stage 2 (Moderate). Chronic cough that gets worse and brings up large amounts of mucus. Shortness of breath and fatigue from exercise or strenuous daily activities. Occasional COPD exacerbation. FEV of 50 – 79%.

Stage 3 (Severe). Shortness of breath even from simple daily activities, weight loss, repeated COPD exacerbations that impact life. FEV of 30 – 49%.

Stage 4 (Very Severe). Symptoms of stages 1 thru 3 plus blue skin color (cyanosis), fluid build up in legs and feet (edema), bloated abdomen, confusion due to decrease oxygen and increased carbon dioxide in the blood, life-threatening COPD exacerbations. FEV of less than 30%.

Treatment. There is no cure but actions can be taken to improve quality of life.

- Quitting smoking can help slow the progression of the disease and improve quality of life
- Life style changes:
 - Avoiding conditions that irritate lungs such as air pollution, cold dry air, hot humid air or high altitudes.
 - Taking rest breaks.
 - Learning breath training techniques to improve airflow.
 - Staying as active as possible with regular exercise.
 - Avoiding respiratory ailments and pneumonia by getting flu shots and pneumococcal vaccine.
 - Eating regularly and well.
- Medications:
 - Bronchodilators open the airway of the lungs to make breathing easier. Can be either short-acting to relieve symptoms or long acting to help prevent breathing problems
 - Anti-inflammatory medications such as corticosteroids.

Things for Behavioral Health Providers to Note:

COPD Information Sheet (continued)

- Social isolation may result from shortness of breath which might reduce a person's participation in activities with family and friends.
- Depression or grief from the realization that this condition will reduce a person's life span and loss of abilities.
- Anxiety about being able to breath can make symptoms worse and can trigger or prolong exacerbations.

References & Additional Information

<http://www.copdguide.com/>

http://www.johnshopkinshealthalerts.com/register_ppc_lung/copd_reg_landing.html?st=ppc&s=GLP_017029_copd_guide&c1=GAW_SE_NW&source=GAW&kw=copd_guide&cr5=2712622354&gclid=CLX-5O6Bt5sCFR0NDQodbQ6S_w

http://www.healthline.com/channel/copd.html?utm_source=copd&utm_ad=copd_bucket&utm_medium=google&utm_campaign=channel&utm_term=copd%20guide