Facts about COPD

What is COPD?

COPD (Chronic Obstructive Pulmonary Disease) is a respiratory disorder largely caused by smoking, characterized by progressive, partially reversible airway obstruction. Over time, the airways of those suffering from COPD become permanently obstructed or blocked and gradually lose their ability to function.

COPD is a major cause of disability and death in Canada and throughout the world. According to a recent study, 1.5 million Canadians report having COPD, and another 1.6 million report that they have symptoms of COPD but have not been diagnosed.¹

As the disease progresses, it has a profound impact on the quality of patients’ lives. Lung function may decline to the point where regular daily activities such as walking and dressing are extremely difficult. The costs associated with COPD affect the family, the healthcare system, and the community as a whole with loss of productivity and the need for additional healthcare services.²

Who is at risk for COPD?

About 90 per cent of COPD cases are caused by cigarette smoking. Both current and former smokers are at risk of developing COPD.

Other causes of COPD include:
- Second-hand smoke
- Air pollution at work and in the environment (dust or chemicals)
- A history of childhood lung infections
- Heredity (for example, a rare genetic disorder called Alpha-1 antitrypsin deficiency)³

What are the symptoms of COPD?

COPD symptoms may include:
- Shortness of breath
- Chronic cough
- Phlegm (or mucus) production
- Frequent lung infections
- Reduced ability to go about daily activities
- A barrel-shaped chest
- Fatigue
- Unexplained weight loss ³
Individuals with COPD generally need to alter their lifestyle in order to better cope with the disease. This includes quitting smoking, taking steps to avoid shortness of breath, staying active and eating well.

Exacerbations/Flare-Ups:
People with COPD can experience exacerbations or lung attacks which involve a worsening of the disease and its symptoms. The more lung attacks a patient experiences, the greater the likelihood their overall health and lung function will decline, and their risk of hospitalization increases. The average patient experiences two to three lung attacks per year. COPD lung attack outcomes can range from the need for further medical intervention to death.

### How is COPD diagnosed?

Demonstration of airflow obstruction through spirometry is the only definitive test for COPD. This diagnostic test measures the amount of air the lungs can hold as well as the time it takes the patient to fully exhale. The more blocked the airways are, the longer it takes to blow the air out.

Physicians may conduct additional tests, including:
- Physical examination of the patient
- Chest x-ray – to see if there is damage to the lungs
- Blood test – to measure the amount of oxygen and carbon dioxide in the blood

Most patients with COPD are not diagnosed until the disease is well advanced. Often people think their symptoms – feeling short of breath or coughing – are a normal part of getting older.

### How is COPD treated?

While COPD cannot be cured, it can be treated. The goals of COPD management include preventing disease progression and improving symptoms, activity levels of patients and enhancing their quality of life.

To date, smoking cessation remains the single most effective intervention to reduce the risk of COPD and slow its progression. COPD management includes both pharmacotherapy (including medicines to open the airways and reduce inflammation), and non-medicinal interventions (including pulmonary rehabilitation, exercise training, and oxygen).
For more information:
Julie Holroyde
Hill & Knowlton Canada
416-413-4625