

Living with COPD

Practical tips and medication information

If you've been diagnosed with chronic obstructive pulmonary disease (COPD), which includes emphysema and chronic bronchitis, you probably want to know more about your condition. This brochure is designed to provide you helpful information to support your journey with COPD.

Remember, COPD is not your fault. It's not always clear why some people develop COPD and others do not. Many factors, including smoking, genetics, and environmental exposures, can all play a role. The most important step is to focus on managing your health and taking action to improve your well-being.

If you have any questions about your condition or treatment, please talk to your healthcare provider. This brochure should not replace the advice of your healthcare provider.



Assessing My COPD

Everyone's experience with COPD is unique. Your treatment plan will be equally unique, customized to address the way COPD affects you.

What is spirometry?

Healthcare providers decide on treatments based on several factors, including the results of a breathing test called spirometry. **Spirometry** is a simple test that measures how much air you can breathe in and breathe out, and how quickly you can breathe out.

Why is spirometry important?

Spirometry is necessary first to confirm that you have COPD, then to help determine how severely it affects your lungs.



What can I expect during a spirometry test?

STEP 1: Take a Deep Breath In

You'll begin by breathing in as deeply as you can, filling your lungs with air.

STEP 2: Exhale into the Spirometer

After taking a deep breath in, you'll exhale as forcefully and quickly as you can into a device called a spirometer. Your healthcare provider will measure how much air you can push out in the first second after blowing out. This is called your Forced Expiratory Volume in 1 second (FEV1).

STEP 3: Your Healthcare Provider Determines Your COPD Severity

Your FEV1 will be compared to a predicted value based on your age, sex, and height. This helps to understand how your lung function compares to what is expected for you.

In general, the lower your FEV1 percentage score, the worse your COPD.

COPD severity levels*

MILD

FEV1 score that's 80% or more of the predicted value

MODERATE

FEV1 score between 50% and 79% of the predicted value

SEVERE

FEV1 score between 30% and 49% of the predicted value

VERY SEVERE

FEV1 score less than 30% of the predicted value

* Based on the Global Initiative for Chronic Obstructive Lung Disease (GOLD) system.

How else might my healthcare provider assess my COPD symptoms?

Besides spirometry, healthcare providers use other tools to measure how symptoms affect your overall health status.



Assessing my COPD symptoms

THE COPD BREATH ASSESSMENT TOOL

Shortness of breath or breathlessness (medical term: “dyspnea”) is a common symptom for many people with COPD. The COPD Breath Assessment Tool is a simple questionnaire that you can take on your own and bring to your healthcare provider to help determine how severe your shortness of breath is.

[Take the COPD Breath Assessment here](#)

COPD ASSESSMENT TEST (CAT™)

While shortness of breath is a hallmark symptom of COPD, it is not the only symptom. The CAT™ is an 8-item questionnaire used to help gauge how well your other COPD symptoms are being managed. Ask your healthcare provider for more information about this test.

NO MATTER WHAT YOUR STAGE OF COPD...

it is still possible to treat and manage your symptoms.

COPD is a progressive disease, which means it will get worse over time. But your healthcare provider can help determine a treatment plan that is optimal for your stage of disease.

Treating My COPD

The type of treatment you receive for COPD depends on a number of things, including:

- The results from your spirometry test
- How severely COPD affects your breathing
- Your risk of acute flare-ups
- Current lifestyle behaviours
- Other health conditions you may have
- Your personal preferences

You and your healthcare provider will work together to come up with a treatment plan that best suits your situation.

WHAT ARE FLARE-UPS?

Sometimes, people with COPD have short periods where their symptoms get worse. These are called “flare-ups”, although they may also be called “exacerbations” or “lung attacks”.

What do flare-ups look like?

During a flare-up, you may have worsening of:

- your breathing
- cough, and/or
- phlegm (mucus), which may become thicker or darker

Taking care of your flare-ups is important. If flare-ups are not properly treated, they can lead to worsening of your COPD and symptoms, and even increase your risk of heart-related issues.

Tell your healthcare provider every time you experience a flare-up so that you can work together to help prevent and manage them.



Treatment goals

It is important to set treatment goals with your healthcare provider. Goal setting helps measure how well your treatment is working and find out if you need to change anything.

Generally, treatment goals for people with COPD, as set out by the Canadian Thoracic Society, relate to:

- Ability to breathe
- Overall well-being
- Risk of flare-ups
- Ability to be mobile and physically active
- Risk of developing serious complications

Treatment goals will be different for everyone and may change over time. **It's important to keep regular appointments with your healthcare provider so that you can stay on top of your condition.**



Treatment approaches

In order to reach your treatment goals, you and your healthcare provider will come up with a treatment plan, which you will revisit from time to time to make sure that it is working for you.

This may mean making changes to how you live and taking certain medication(s).

Lifestyle changes

Lifestyle changes are things you can do to help manage your COPD, in addition to using your medication as prescribed.

This may include:



Stop smoking.

Quitting smoking is important to help slow down the progression of COPD.



Ensure your vaccinations are up to date.

This can help prevent COPD flare-ups.



Learn effective breathing exercises and coughing techniques.

Certain techniques can save energy, help reduce anxiety caused by shortness of breath, and leave you feeling less tired after coughing.



Know the signs of early flare-ups.

This can help you take action quickly.



Stay active.

Speak to your healthcare provider about how you can safely remain physically active.



Learn how to use your inhaler properly.

Make sure you review your inhaler technique with your healthcare provider regularly to help ensure you are getting the most out of your medication.



Have an action plan.

Make a plan with your healthcare provider for what to do when you have flare-ups and review your plan every year.



My COPD checklist

Below is a quick checklist to help guide discussions with your healthcare provider about how to optimally manage your COPD.

Keep this checklist and your medication list handy and review with your healthcare provider at your next appointment.

- I've had my COPD diagnosis confirmed with a breathing test (spirometry).

- I will review my symptoms of COPD with my healthcare provider.

- I will review the symptoms of a COPD flare-up and report if I have had any flare-ups or if I have used my COPD action plan.

- I will discuss ways to prevent and manage COPD flare-ups.

- I will review my current inhaler routine and ensure that I am using them correctly.

- I will discuss other treatment options that may improve my COPD (exercise, smoking cessation, diet, vaccination, pulmonary rehab, referral to specialist/certified respiratory educators, respiratory therapist).



Understanding My COPD Medications

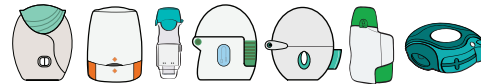
Many medications are available to help you manage your COPD symptoms and prevent flare-ups. Your healthcare provider will decide which one(s) are best suited for you.

This is not a complete list of available COPD medications. Please speak to your healthcare provider for more information.

MILD SYMPTOMS

- Uses one type of medicine in one inhaler
- Taken daily (once or twice)
- Help keep your airways open

Some monotherapy options

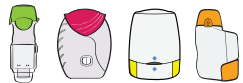


MODERATE/SEVERE SYMPTOMS

Low Risk of Future Flare-Ups

- Uses two types of medicines in one inhaler
- Taken daily (once or twice)
- Helps keep airways open

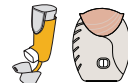
Some dual therapy options



High Risk of Future Flare-Ups

- Uses three types of medicines in one inhaler
- Taken daily (once or twice)
- Helps keep airways open
- Prevents future exacerbations

Some triple therapy options



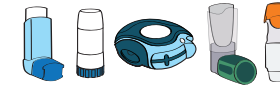
Combining many medications into **one inhaler** is preferable to using many different inhalers. This helps reduce your risk of using the inhalers incorrectly or forgetting to take them.



Relievers

- Everyone with COPD should have one
- Works fast to relax your airways, making it easier to breathe
- Wears off after a few hours
- Taken as needed, but should not be relied on for regular/daily therapy

Some reliever options



Oral medications

Oral medications can be taken regularly to help prevent frequent flare-ups in individuals who are already using a triple therapy inhaler. Your healthcare provider will advise if oral medications are right for you in addition to your inhalers.

Other approaches

Your healthcare provider may suggest other treatment approaches for your COPD. **If you have any questions, please don't hesitate to ask them.**

Using My COPD Inhaler

Inhalers are devices that deliver medicine straight to your lungs. **It is important to use your inhaler correctly to help ensure that you get the right dose of medication every time you use it.**

It may take a few tries, but you will get it!

NOT SURE YOU'RE USING YOUR INHALER CORRECTLY?

If you need help with your inhaler or just aren't sure you're using it the right way, **talk to your healthcare provider.** They will show you how to use your inhaler correctly and confidently.

Common types of inhalers used in COPD

Pressurized Metered-Dose Inhalers (pMDIs) (a.k.a. “puffers”)

- These inhalers release a spray of medicine when you press them
- It is recommended to use your inhaler with a “spacer”
- A spacer is a long chamber that attaches to the mouthpiece of your inhaler and holds the spray before you inhale. This allows you to coordinate breathing in the medicine more easily and helps ensure that more medicine enters your lungs, rather than your mouth, throat, or stomach

Breath-Actuated Metered Dose Inhalers (bMDIs)

- These devices automatically release medicine when you breathe in, no pressing required

Dry Powder Inhalers (DPIs)

- These devices require you to breathe in quickly and deeply to get the powdered medicine into the lungs

Soft Mist Inhalers

- These inhalers release a slow-moving mist of medicine for inhalation








To report a side effect, please visit [Health Canada's Adverse Reaction Reporting page](#) for information on how to report online, by mail, or by fax, or call toll-free: 1-866-234-2345. Speak to your healthcare provider if you need information about how to manage your side effects.


This brochure (other than the appendix) was developed by ACT on COPD, with support from AstraZeneca Canada Inc.

The COPD Breath Assessment Tool

How short of breath are you?






Please select one of the options from the diagram below which best describes your shortness of breath.

<p>I only get breathless with strenuous exercise.</p>  <p><input type="checkbox"/> GRADE 0</p>	<p>I get short of breath when hurrying on the level or walking up a slight hill.</p>  <p><input type="checkbox"/> GRADE 1</p>	<p>I walk slower than people of the same age on the level because of breathlessness, or I have to stop for breath when walking on my own pace on the level.</p>  <p><input type="checkbox"/> GRADE 2</p>	<p>I stop for breath after walking for about 100 metres or after a few minutes on the level.</p>  <p><input type="checkbox"/> GRADE 3</p>	<p>I am too breathless to leave the house, or I am breathless when dressing or undressing.</p>  <p><input type="checkbox"/> GRADE 4</p>
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Intensity of shortness of breath 

Adapted from the Modified MRC Dyspnea Scale.

At what time(s) throughout the day do you experience breathlessness? Check all that apply.

 <p><input type="checkbox"/> Morning</p>	 <p><input type="checkbox"/> Midday</p>	 <p><input type="checkbox"/> Evening</p>	 <p><input type="checkbox"/> Night</p>	 <p><input type="checkbox"/> Day-to-day activities</p>
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The COPD Breath Assessment Tool

Do you limit any of your activities due to your shortness of breath?

Yes No

How often do you experience a cough?

Never Rarely Occasionally Daily Several times a day

Do you cough up any fluids like mucus or phlegm when you experience a cough?

Never Rarely Occasionally Very often Always

How often do you experience chest tightness and/or wheezing?

Never Rarely Occasionally Daily Several times a day



Don't delay: If the intensity of your breathlessness is a **Grade 2 or higher**, or you have started noticing **new or worsening symptoms**, you may be experiencing a **COPD flare-up**.

Talk to your healthcare provider today!

This tool is designed for patients with COPD, including chronic bronchitis and emphysema.