

CAUSES OF COPD

In 90% of cases, COPD is caused by smoking. Other possible risk factors are :

- » Alpha-1-antitrypsin deficiency, which is a rare hereditary disorder causing early onset of pulmonary emphysema and very severe bronchial obstruction ;
- » Second-hand smoke ;
- » Air pollution (dust and chemicals) ;
- » Repeated lung infections during childhood.

COPD MANAGEMENT AND TREATMENT

There is no cure for COPD, but it can be managed and treated at all stages of the disease process. The following factors will help you manage your disease :

• Smoking Cessation

Quitting smoking slows down the progression of COPD. Many resources are available to help you quit smoking :

» **The Quebec Lung Association**

Get support from a respiratory therapist via our info line :

- Call 1-888-POUMON-9 (768-6669) ext. 232
- To join the Enfin libre! du tabac smoking cessation program and participate in group meetings, call 1-888-POUMON-9 (1-888-768-6669) ext. 222

» **I QUIT NOW** (Quebec MSSS) Call 1-866-JARRETE (527-7383)

» **Smoking Cessation Centres** Contact a CLSC in your area.

• Vaccination

People with COPD and their families should be vaccinated against influenza every fall. Your doctor may also recommend vaccines against pneumococcal pneumonia.

• Medication

Drugs used to treat COPD are designed to maximize lung function, reduce shortness of breath and improve exercise tolerance. Several prescription drugs are available and so are medication-taking devices. Your doctor is the professional who will determine the best treatment for you. If you have any difficulty using the prescribed medication delivery device, it is important to discuss it with your doctor. The technique used for taking your medication has a direct impact on its effectiveness.

• Pulmonary Rehabilitation

Pulmonary rehabilitation programs provide comprehensive care that considers the psychological, social and physical impacts of the disease. Registrants participate in sessions with an interdisciplinary team of health professionals which cover a variety of topics (physical exercise, nutrition, breathing techniques, energy conservation principles, etc.). The Inspir'er pulmonary rehabilitation centre, located on the premises of the Quebec Lung Association, offers a complete pulmonary rehabilitation program free of charge. For more information or to find out where such a program is available in your area, contact us at 1-888-POUMON-9 (768-6669) ext. 236.

• Oxygen Therapy

Home oxygen therapy is prescribed to individuals who meet specific criteria to increase the concentration of oxygen in the blood when it is considered insufficient. Your attending physician is the resource person for more information on oxygen therapy.

QUEBEC LUNG ASSOCIATION

The Quebec Lung Association was incorporated in 1938 and is the only non-profit organization promoting respiratory health. Its mission is to fight lung disease through education, prevention, rehabilitation, support for the people affected and their families, as well as research on respiratory diseases.

The QLA also addresses environmental factors that pose risks to respiratory health.

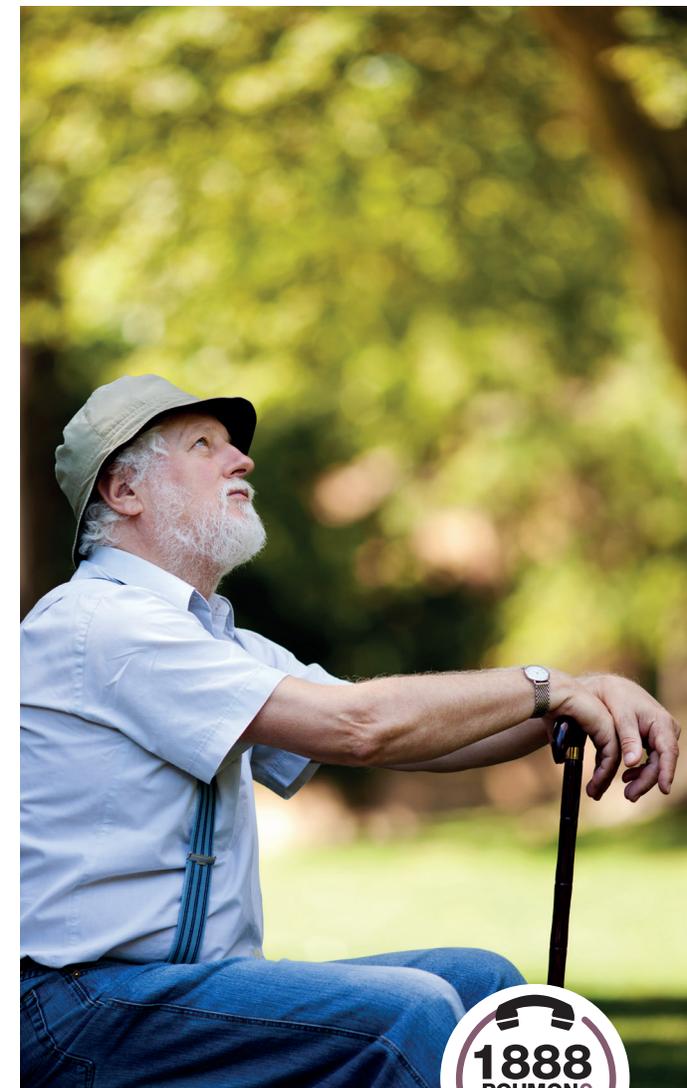
Through its work to improve the respiratory health of Quebecers and the living conditions of people suffering from respiratory illnesses, and by encouraging them to take charge of their health, the Quebec Lung Association acts directly on the condition of people of all ages, which has a direct impact on public health.

Contact us by calling
1-888-POUMON9 (1-888-768-6669)
or by emailing us
info@poumonquebec.ca
Visite ou website
poumonquebec.ca/en



DO YOU HAVE COPD?

(chronic bronchitis and emphysema)



poumonquebec.ca



WHAT IS COPD ?

COPD groups two pulmonary issues: chronic bronchitis and emphysema. Both diseases cause a progressive obstruction of airflow through the airways that is only partially reversible. It is possible to have one or both illnesses.

DO YOU HAVE COPD ?

COPD is a respiratory disease that develops slowly. The first symptoms may be coughing and shortness of breath during physical exertion. Early diagnosis can lead to better disease management and a better quality of life.

STOP FOR A MINUTE : TAKE THE COPD SCREENING TEST !

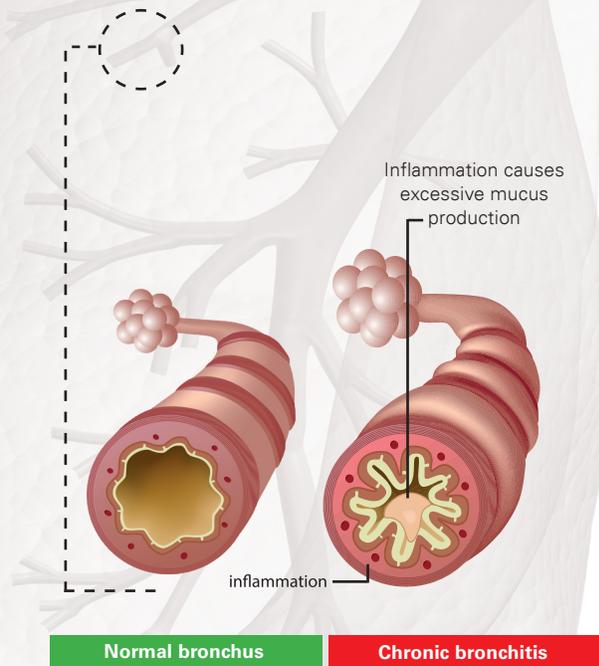
- » If you have answered YES to at least 2 questions, ask your doctor for a medical evaluation to determine whether you have COPD. atteint(e) de MPOC.

	yes	no
1 Do you regularly cough ?		
2 Do you regularly cough up phlegm ?		
3 Do even simple chores make you short of breath ?		
4 Do you wheeze at night or when you exert yourself ?		
5 Do you often get colds, and do they last longer than for other people ?		

- » To confirm a COPD diagnosis, your doctor must prescribe a spirometry test which will allow you to partly evaluate your lung function in a quick and simple way.

CHRONIC BRONCHITIS

Chronic bronchitis is a permanent inflammation of the bronchi and an excessive mucus production that hinders airflow from the lungs. Once the obstruction becomes severe, the lungs do not fully empty, and air is trapped in the alveoli. This disease is characterized by chronic cough with sputum lasting at least three months in a row for two consecutive years.

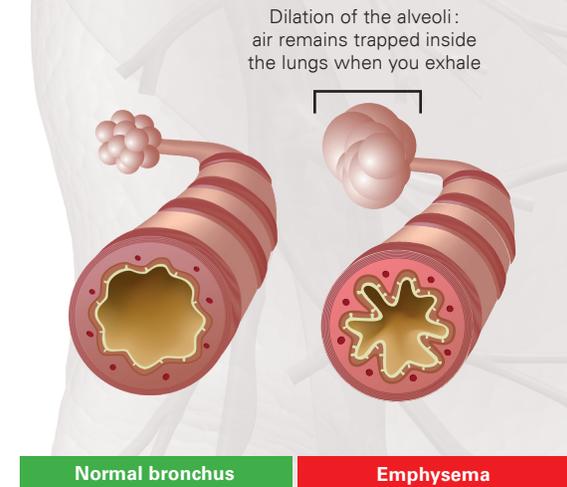


Result : People with chronic bronchitis experience coughing, spitting and shortness of breath during exercise or daily activities.

EMPHYSEMA

Emphysema affects the alveoli inside the lungs. Normally, alveoli act like small elastic bags: they inflate when you inhale and empty when you exhale. However, emphysema causes dilation of the alveoli and destruction of the alveolar walls.

The air then remains trapped inside the damaged air sacs, making breathing more difficult. Oxygen and CO2 exchanges are also reduced, which lowers the amount of oxygen available in the body. In addition, the destruction of lung tissue makes it less elastic. A progressive intolerance to effort then develops.



In summary: People with emphysema experience shortness of breath during exercise or daily activities.

COPD SIGNS AND SYMPTOMS

People with COPD will usually experience one or more of the following symptoms :

- » Shortness of breath, ranging from breathlessness due to exertion to being too short of breath to get dressed ;
- » Chronic cough (especially for chronic bronchitis) ;
- » Production of secretions (especially for chronic bronchitis) ;
- » Frequent respiratory infections (influenza, pneumonia) and longer recovery time ;
- » Fatigue ;
- » Unexplained weight loss ;
- » Reduced ability to engage in daily activities.

