

Expert Answers To Vital Questions On Chronic Obstructive Pulmonary Disease

(NAPSA)—Nationwide, more than 12 million people have been diagnosed with chronic obstructive pulmonary disease (COPD), and it is estimated that as many as 12 million more have the symptoms but are unaware that they have the disease. There is no cure for COPD, and if left untreated, it can affect everyday life, making it harder for people to do the things they enjoy. With early diagnosis and proper treatment, however, COPD can be managed, enabling people to stay active and feel better.

James P. Kiley, Ph.D., director of the Division of Lung Diseases at the National Heart, Lung, and Blood Institute, part of the National Institutes of Health, and John W. Walsh, co-founder and president of the COPD Foundation, answer questions about COPD.

Q: What is chronic obstructive pulmonary disease?

Kiley: COPD describes a group of respiratory conditions that over time make it difficult to breathe. Sometimes, COPD is also referred to as emphysema and chronic bronchitis. It is the third leading cause of death in the United States.

Symptoms of COPD include a constant cough (also called a smoker's cough), shortness of breath, excess mucus production, breathlessness and wheezing. When COPD is severe, it can get in the way of even the most basic tasks like light housework or taking a walk.

Q: Who is most affected by COPD?

Walsh: COPD most often affects adults age 45 and older



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with a history of smoking, which is why it is sometimes referred to as a smoker's disease. Yet, 24 percent of COPD patients have never smoked. Exposure to lung irritants and air pollutants, such as fumes, dust and secondhand smoke, may also lead to COPD. In rare cases, COPD may be caused by a genetic predisposition known as alpha-1 antitrypsin deficiency.

Q: What makes COPD so hard to diagnose?

Kiley: Symptoms of COPD start slowly and worsen over time, leaving many to dismiss them as the first signs of aging, a common cold or being out of shape. Often, patients don't bring up their symptoms during doctors' visits because they don't think these symptoms matter. It is important to raise any health issues with your health care provider. Talk to your doctor about any breathing problems you may have and, if necessary, ask for a spirometry test. Spirometry is a simple, noninvasive breathing test that can help diagnose COPD.

Q: What should I do if I am diagnosed with COPD and how can COPD be treated?

Walsh: If you are a smoker, the best thing you can do is to quit smoking. Your doctor may also prescribe pulmonary rehab or physical therapy to help you stay active and do daily tasks. Other treatment options are medications, or surgery if symptoms are severe.

It is also recommended that people with COPD take precautions against the seasonal flu and get an annual flu shot, as the flu can cause serious problems for people with COPD.

Q: What is being done to find a cure for COPD?

Kiley: At the NHLBI and NIH, we are committed to finding a cure for COPD. We support research aimed at preventing the disease and conduct clinical trials to test medicines, medical devices, surgeries and other procedures. Today, several treatments are available that target COPD symptoms and bring relief to patients. We're also working to better understand the mechanisms that lead to COPD, and we've made progress finding genes that can predispose you to COPD. In addition, we're funding research to help identify people with COPD who have not yet been diagnosed.

To learn more about COPD, visit the NHLBI's *COPD Learn More Breathe Better*[®] campaign resources at <http://COPD.nhlbi.nih.gov> or visit <http://www.copdfoundation.org/> for COPD Foundation resources.