“Staying Active with COPD”

People with COPD are frequently short of breath during activity. Because of this, they often avoid doing any more physical activity than is absolutely necessary and become sedentary (a medical term for “couch potato”). Because they are inactive, their muscles begin to deteriorate and don’t work as efficiently as they should, requiring even more oxygen to function. This increased use of oxygen in turn makes them more short of breath, which makes them less active, which makes their muscles less efficient, and so on, and so on…

This vicious downward spiral is a dangerous pattern for the patient with chronic obstructive pulmonary disease (COPD) or other lung diseases. Data recently presented by Dr. Thomas Petty, a world-renown pulmonologist and leading author on COPD, indicates that inactive COPD patients do not live as long on average as those who stay active. When looking at data from COPD patients who had a low blood oxygen level, the patients who used their oxygen appropriately and remained active lived the longest on average. The patients that used their oxygen less and were inactive lived the shortest on average.

What can a COPD patient do to become more active?

The COPD patient must commit to breaking the habit of being inactive. There are several ways to do this.

• **Consult Your Doctor** – Before starting any increased level of activity, talk to your doctor. He or she may want to do some testing to determine the right level of activity for you.

• **Check Your Oxygen Level** – If you have COPD and are getting short of breath during activity, you should have your oxygen level checked during exercise. This can be done simply by wearing a small, painless clip called an oximeter on your finger while walking. If your oxygen level is low, the doctor may prescribe oxygen for you to use.

• **Use Your Portable Oxygen** – If your doctor prescribes oxygen during activity, use it. Using oxygen during activity has been shown to decrease shortness of breath, increase the level and length of activity, and, as we mentioned earlier, increase your life expectancy. Many patients are reluctant to wear their oxygen in public due to “what people might think.” At one time oxygen use was associated with being near to death. Now people are using oxygen earlier and it is common place to see oxygen users in the mall, in airports, and doing all sorts of activities. These people refuse to allow their COPD to get them down. They use their oxygen to stay active and to keep them in better shape.
• **Use Pursed-Lip Breathing** – This breathing technique is often adopted by COPD patients without any instruction – they have just learned it on their own. This technique keeps the airways open longer, which allows you to get more stale air out of your lungs. After inhaling through your nose, exhale against tightly pursed lips, like you’re whistling. Exhaling should not be forced and should take about twice as long as inhaling. This may require some practice at first and is great to use during activity to lessen shortness of breath.

• **Work While Exhaling** – When doing activities that make you short of breath, try resting while you inhale and doing the work while exhaling. For example, when going up stairs, pause on a step as you inhale, and then go up two stairs as you exhale using your pursed-lip breathing. This works well when using your arms to reach overhead. Relax while inhaling. Then, while exhaling, reach over your head to comb your hair or get a can of soup from the shelf.

• **Pace Yourself** – When a COPD sufferer does an activity that will make him short of breath (ascending a flight of stairs) he will often hurry to get it over with, only to be severely short of breath and nearly ready to collapse when finished. A better pattern is to pace yourself. Take a couple of steps at a time using the technique described above. That way when you get to the top, you won’t be completely out of breath and have to stop and rest.

• **Take Your Medications** – It is important to take your medications regularly as ordered by your physicians. Failure to do so may result in more shortness of breath because your airways are not as open. For example, most inhaled medications like albuterol and ipratropium only last 4 to 6 hours and must be taken regularly to keep your airways open.

• **Activity Program** – In order to recondition your muscles, your doctor may prescribe an exercise or activity program. You should not start a serious activity program without your doctor’s approval. The program may be as simple as walking each day or as complex as using an exercise bike or treadmill. The goal is typically to perform 20-30 minutes of a moderately strenuous activity at least 4 days or more per week. Don’t be discouraged if you aren’t able to start by doing a full 20 minutes – most COPD sufferers can’t. Start slowly and gradually increase the intensity and length each day.

• **Pulmonary Rehab** – Your doctor may ask you to attend a formal pulmonary rehabilitation program. These programs are usually associated with hospitals and involve attending sessions that meet several times each week. Each session is usually a combination of education about your disease and how you can better manage it along with an exercise time. During the exercise session, they may monitor your heart rate and oxygen level to make certain you are doing OK with the activity. Ask your doctor about programs in your area.

Staying active plays a vital part in managing your COPD. Don’t give into the temptation just to give up and retire to the recliner. Talk to your doctor and then start slowly – developing new habits that keep you active. In time, you will feel better, be more active, and even be happier when you do.