JA RED
Joint Action on REspiratory Diseases

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Self-management of COPD

This brief guide summarizes the key areas of self-management in chronic obstructive pulmonary disease (COPD). Effective self-management of COPD involves proper use of medication, getting vaccinated, quitting smoking, maintaining physical activity and ensuring adequate and varied nutrition. These strategies help improve symptoms, prevent exacerbations, and enhance the overall health and quality of life for individuals with COPD.

Medication Management

Effective medication decreases your symptoms and reduces risk of disease exacerbations. Bronchodilators improve airflow rapidly and thus reduce shortness of breath, especially during exertion. Long-acting bronchodilators relieve symptoms and prevent exacerbations more effectively than the short-acting ones. They should be used regularly once or twice a day. Some patients may benefit from regularly taken inhaled steroids. Your doctor will prescribe the necessary medication and provide instructions for its use.

Smoking Cessation

Quitting smoking is key to managing COPD and improving its prognosis. If you've quit or never smoked, stay smoke-free. If not, here are some tips to help.

- Identify whether your addiction is physical, psychological, social, or a mix. You can use the Heaviness of Smoking Index online to assess physical addiction.
- If you're moderately or highly dependent on nicotine, you can ask your doctor or nurse about nicotine replacement therapy or withdrawal medications
- Common withdrawal symptoms include sleep difficulties, irritability, and anxiety, lasting from a few days to two weeks. You can trust that the symptoms will pass.
- Plan for risk situations and decide on a quit date.

Physical Activity

Physical activity is very important for individuals with COPD. It is associated with a better prognosis and improved quality of life. Here are some tips to increase physical activity:

Daily Activity:

- Aim to go outside every day for a moment, engaging in activities like brisk walking or yard work. You can start with short bouts and progressively increase the time spent in different activities during the following weeks.
- Incorporate short sessions of physical activity throughout the day, such as brisk walking. Every minute counts!
- Making physical activity more enjoyable calling a friend or listening to music or audiobooks at the same time.

Starting a physically challenging hobby:

- Try to remember what kind of activities you enjoyed doing earlier in life and consider starting them again or try something new.
- Choose between solo or group activities based on your personal preferences.

Inhaler Use

There are two main types of inhalers: Metered-dose inhalers and dry powder inhalers. Instructions vary depending on the type of the inhaler. If possible use spacer and holding chamber with aerosol inhalers except breath-actuated metered dose inhalers. It is easier to take aerosol with a chamber, and it helps in finding the correct breathing technique.

Proper technique in using your inhaler is crucial in managing COPD.
Ask your nurse or doctor for advice on how to use them.

METERED-DOSE INHALER ("SPRAY") WITH HOLDING CHAMBER

1. Check the dose counter if one exists in your inhaler.
2. Shake the inhaler.
3. Remove the cap.
4. Attach the inhaler to the holding chamber.
5. Place the mouthpiece of the holding chamber in your mouth.
6. Press the trigger of your inhaler to release the medication into the chamber.
7. Breathe in and out three to five times through the mouthpiece.

METERED-DOSE INHALER ("SPRAY")

1. Check the dose counter if one exists in your inhaler.
2. Shake the inhaler.
3. Remove the cap.
4. Breathe out gently to the side of the inhaler.
5. Place the inhaler in your mouth and breathe in slowly while pressing the inhaler.
6. Hold your breath for 5-10 seconds and breathe out through your nose.

DRY POWDER INHALER (DPI)

1. Check the dose counter if one exists in your inhaler
2. Shake the inhaler.
3. Remove the cap.
4. Load the dose.
5. Breathe out gently to the side of the inhaler.
6. Insert the inhaler into your mouth and take a strong, deep breath in.
7. Hold your breath for 5-10 seconds and breathe out through your nose.

Management of exacerbations

- In COPD exacerbation the symptoms like shortness of breath and cough worsen significantly compared to their usual level, typically lasting for at least 1-2 weeks.
- Increase the use of your medication as directed by the doctor – Take short-acting bronchodilator more often than usually and possibly start a course of oral corticosteroid and or antibiotic, if prescribed by your doctor.
- Adjust physical activity with your symptoms and condition.
- Use airway clearance techniques familiar to you, for example Positive Expiratory Pressure (PEP) or other breathing manoeuvres, at least 2-3 times per day to remove phlegm from your airways.
- If symptoms worsen or are difficult, seek for medical attention from the nearest emergency room. For example, you have continuous severe shortness of breath or difficulties to sleep, or you otherwise feel that home treatment is insufficient.

Finnish Lung Health Association is responsible for preparing the material.