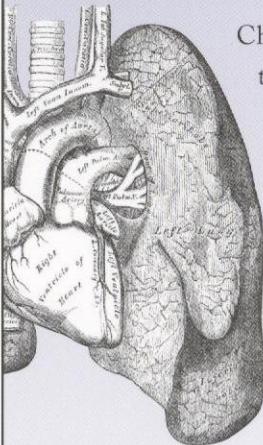


Chronic Obstructive Pulmonary Disease

June - Men's Health Month

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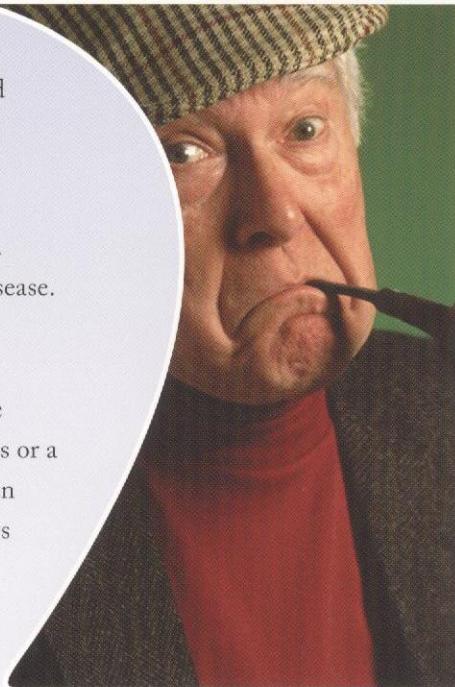
Chronic obstructive pulmonary disease (COPD) is an umbrella term for a group of respiratory tract diseases that are characterized by airflow obstruction or limitation.

Causes

The main risk factor in the development of COPD is smoking. Approximately 15% of all chronic smokers will develop the disease.

Progression

COPD is a progressive disease. Early signs and symptoms are shortness of breath on exertion, recurrent respiratory infections or a morning cough. As the disease continues, the symptoms are seen with increased frequency and severity. In the late stages, the patient often experiences severe cough, constant wheezing, and shortness of breath with minimal exertion or rest. Progression is typically caused by the patient's continued exposure to tobacco smoke. Although medications often decrease symptoms, it is not believed that they prevent the progression if the patient continues to smoke.



Diagnosis

The diagnosis of COPD is usually suggested by symptoms; it is a clinical diagnosis and no one test is definitive. A comprehensive history from the patient, physical examination, and confirmation of airflow obstruction are all vital in establishing the diagnosis.

Management

COPD is not curable. Medicines are often used to control symptoms or to reverse acute exacerbations. COPD in all forms typically progresses if the patient continues to smoke. Therefore, smoking cessation is one of the most important factors in slowing down the progression of COPD.

The inflammatory component of the disease can be modified with the use of steroid drugs (usually administered by inhalation in order to avoid any systemic effect) but several weeks of treatment must be given before the effect can be evaluated. Oxygen therapy is the only current medical intervention that is proven to prolong the lives of patients with this disease process.

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