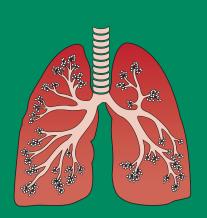
Chronic Obstructive Pulmonary Disease (COPD)

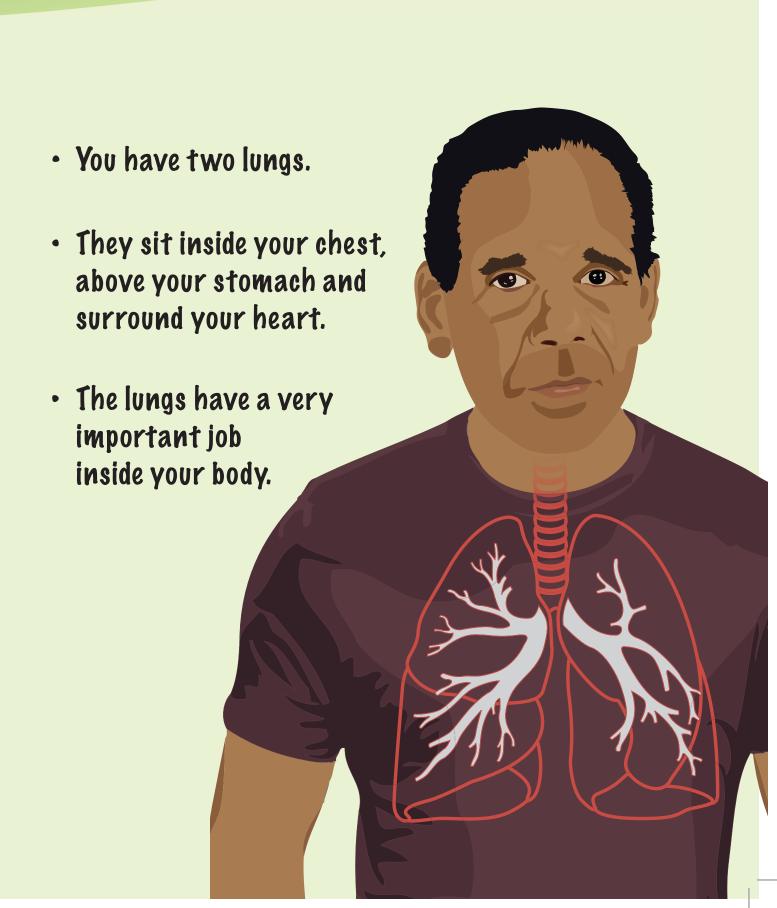


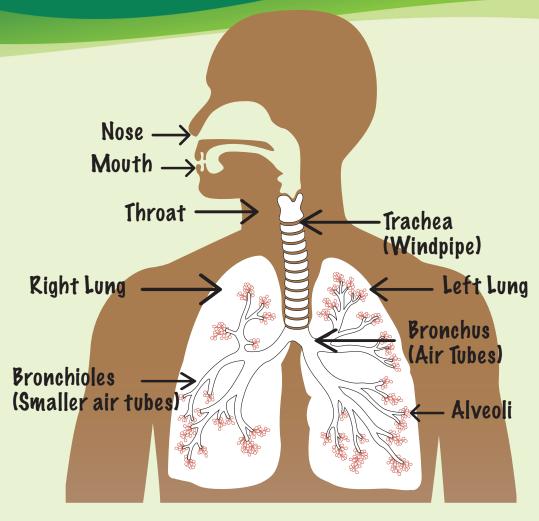


In Partnership



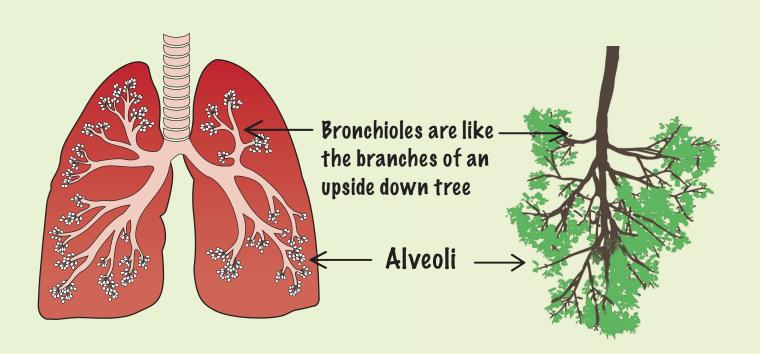


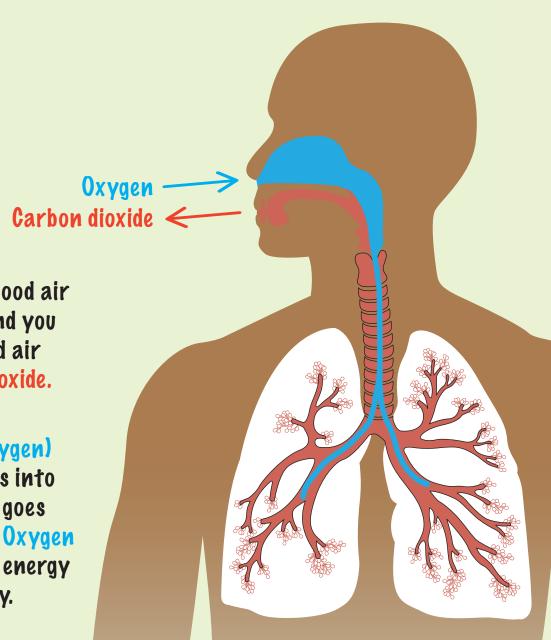




- When you breathe in, air enters the lungs.
- The air enters in through your mouth/nose and travels down your windpipe.
- The wind pipe then divides into two smaller air tubes.
- One air tube goes into the left lung and one into the right lung (left and right bronchus).
- The air tubes then branch out into smaller air tubes (bronchioles).
- The air travels through the lungs and enters the body as oxygen.

- The smaller air tubes (bronchioles) look like the branches of an upside down tree. At the end of the bronchioles are tiny little air sacs that look like tiny bunches of grapes, these are called alveoli.
- The air sacs (alveoli) have an important job of giving the good air (oxygen) to your blood and taking the used air (carbon dioxide) out.

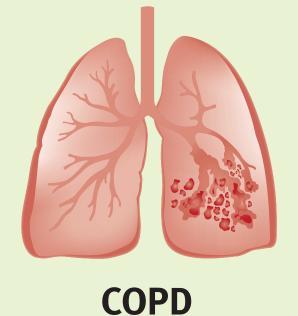




- You breathe in good air called oxygen and you breathe out used air called carbon dioxide.
- The good air (oxygen)
 you breathe goes into
 your lungs then goes
 into your blood. Oxygen
 gives your body energy
 to work properly.

Chronic Obstructive Pulmonary Disease (COPD)





What is COPD?

COPD = Chronic Obstructive Pulmonary Disease

It is lung sickness that makes the air flow out of the lungs slow. It gives you short wind.

Chronic = means it won't go away.

Obstructive = means partially blocked.

Pulmonary = means in the lung.

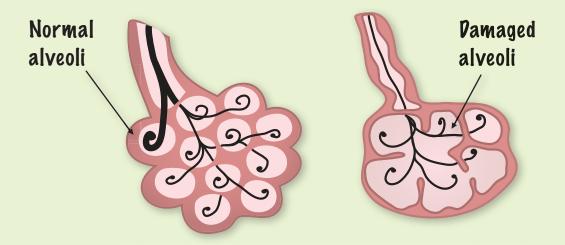
Pisease = means sickness.

What Causes COPD?

Obstructive = means partially blocked.

Blockage is caused by:

• The alveoli (air sacs) getting damaged. Not all the air comes out and so there is not enough room for new air to get in. This over stretches the air sacs.



- The bronchioles (small breathing tubes) get swollen. Not much room left for air to move in and out
- Swollen bronchioles make more spit to try and soothe the swelling.
 The spit also blocks the breathing tubes.



What Causes COPD?



 SMOKING - 1 in 5 people who smoke will get COPD.



 Living and working in smokey and dusty places.



Chest infections when you were a child.

Signs and Symptoms

You may not have all of these symptoms, some might be:

- Coughing for a long time.
- Cough up spit.
- Have very short wind.
- Become tired easily.

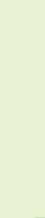
You might have only one of these signs and symptoms, or you might have all...... everyone is different.



What Doctor's need to know?



Do you cough?



Have you ever smoked?



How long have you been sick?



Po you/have you worked?
What type of work do you do?



Your Story



Po you get short wind when you walk?

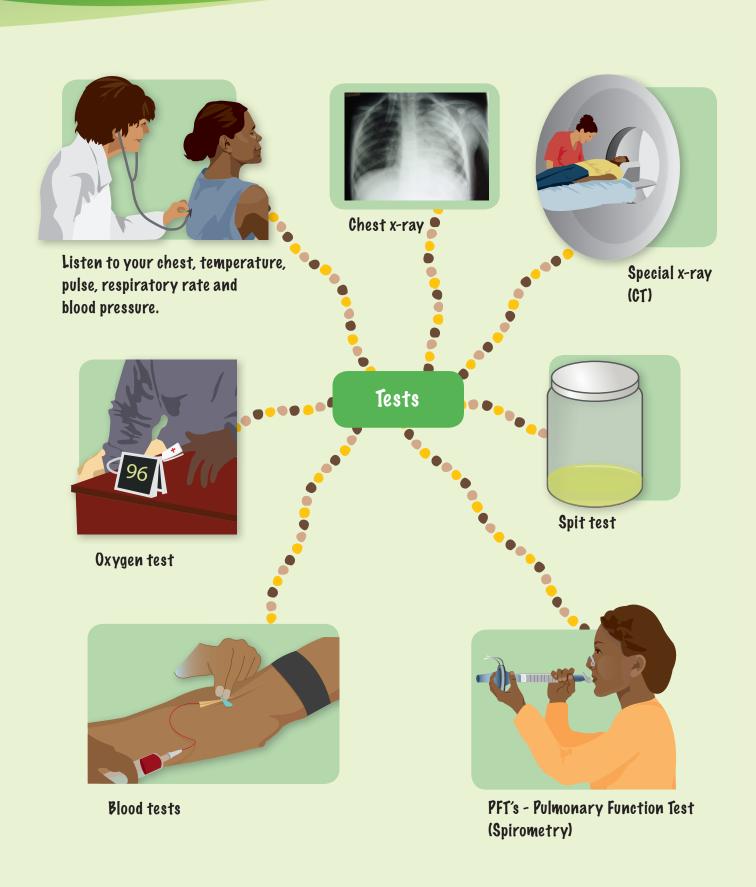


Is there a lot of smoke or dust where you live or work?



Po other members of your family have lung sickness?

What tests do the doctors do?



There are different levels of COPD

Mild:

You get short wind if you work or walk fast and go up hills and stairs.



Moderate:

You find it harder to walk fast, go up stairs and hills and do jobs around the house.





Severe:

You can only walk a few steps and you can not go up stairs or hills. You get tired easily.



Treating COPD: Lifestyle changes

Try and stop smoking, it might take a few tries to stop.





There are medications to help you stop smoking - ask your doctor or health worker.

Treating COPD: Medication

1 - Relievers (Puffers to be used with a spacer)



Ventolin Puffer



Atrovent Puffer



Bricanyl Turbuhaler (not used with spacer)



Help your short wind, cough or wheeze.

Open up the airways. Help you cough up spit.

2 - COPD Medicine

Spiriva handihaler



Onbrez Breezhaler

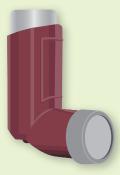


Treating COPD: Medication

3 - Preventers



Flixotide Puffer



Qvar Puffer



Pulmicort Turbuhaler

Preventers

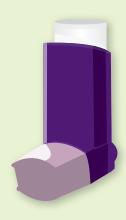
Make airways less sensitive. Reduce swelling. Pries up thick spit/mucus.



4 - Combination



Symbicort Turbuhaler



Seretide Puffer

Combination medications

Inhaled preventer and symptom controller. Prevent inflammation and swelling of the lining of the airways and keeps your airways open longer.

How to use puffers with a spacer

COPP puffer medicine is best taken using a spacer to get more medicine into the lungs.

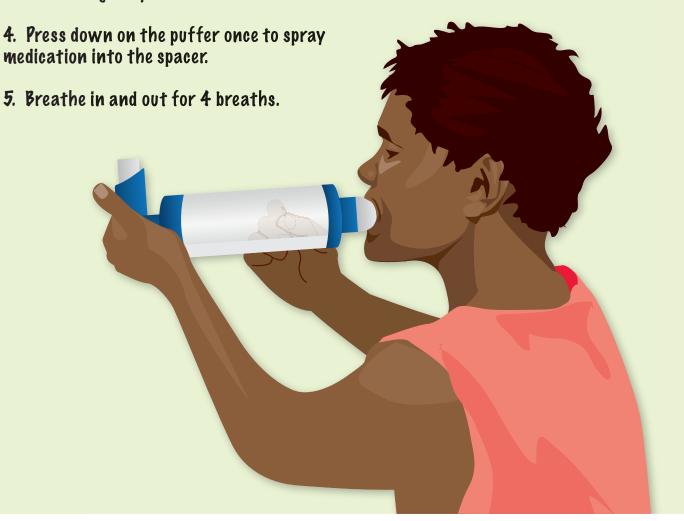
How to use a puffer with a spacer

- 1. Remove the cap from the puffer.
- 2. Shake puffer well and put it into the hole at the end of the spacer.
- 3. Put the mouth piece of the spacer into your mouth, and close your lips around it.
 Breathe out gently.

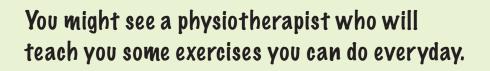
Wash the spacer once a month in warm soapy water.

Leave it to dry.

Po not rinse or wipe it dry.



Treating COPD: Physiotherapy



Exercises like hunting, fishing, walking, swimming can make you feel better and help you get rid of the spit inside your lungs.

Other exercises can be done with special breathing equipment.



The physiotherapist will teach you different ways to breathe.



Treating COPD: Pulmonary rehabilitation

Pulmonary rehabilitation is a program for people who have COPP. The program will help you feel better.

Lots of people will work with you to make a good program that will help you feel better.

The program will look at things like:

- Exercises.
- Helping you to understand your lung disease.
- Good ways to get the best out of food.
- Services that may help you to manage better.



Treating COPD: Eating well

People with COPD

- Breathe fast.
- · Use a lot of energy.
- · Pon't feel like eating.

If you eat 5 small/ soft meals you will have more energy to do more activities and fight off infections.



If you don't eat well you will have no energy, become weak, get more infections, and won't be able to get around.

Your short wind is not as bad.

Your short wind will get worse.



Try and keep a healthy weight.

Treating COPD: Stress/feeling sad

People with COPD can feel very sad, you might worry about:

- Sickness.
- Work.
- Family.
- Money.
- Get scared when your breathing is worse.





How to feel less sad:

- · Go out with family and friends.
- Eat small meals.
- Exercise often.
- Get plenty of sleep.
- Medicines may help.
- Talking to people about feeling sad.

Treating COPD: Oxygen

Not all people will need oxygen.

Using oxygen can help you:

- · Feel better when you wake up.
- · Have less short wind when having a shower or walking.
- Think better.
- Have more energy.

There are important things to remember when you are using oxygen at home:

No Smoking.

Po not go near gas stoves or open fires.

Working out how sick you are

Use your action plan guide

Feel Ok

Easy to breathe.

Normal amount of spit/no bad smell.

Normal medicine.

Not feeling hot.

Eating well.

Normal energy levels.



Feel a little bit sick

Go to clinic or Doctor

Hard to breathe.

Bit more spit/yellow/green/no smell.

More medicine to help short wind.

Bit hot.

Off food/feeling sick.

- Usual medicine increased.
- Antibiotic medicine.

Feel Very sick

CALL AMBULANCE - GO TO HOSPITAL

Very hard to breathe.

Lots more/dark/thick/smelly spit.

Lot more medicine for short wind.

Hot.

Not eating/vomiting.

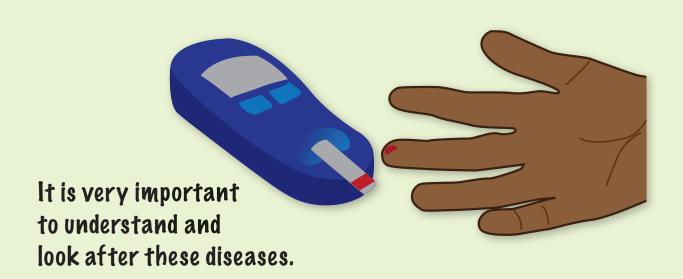
- You will need to stay in hospital.
- Need oxygen.
- Increase usual medicine.
- Antibiotic medicine in a drip.
- Other medicines.

Things to remember

Some people with COPP will often have other chronic diseases such as:

- Heart disease.
- Asthma.
- · Piabetes.





Ways to help improve your lungs

Quit smoking.



Visit your doctor/clinic

- when you are well.
- when you are sick.

Keep a healthy weight.



Stopping getting germs by keeping yourself clean.

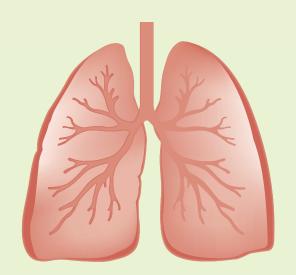




Make sure you get all your immunisations like the flu needle every year.

Why do we need to look after our lungs?

Strong lungs can help you enjoy your life.



If your lungs are sick, it is important to understand the sickness.

You need to know how to look after your sickness.

People with weak lungs can go on to have other problems later in life like heart problems.

Lots of people with lung sickness, spend a lot of time in hospital.



Acknowledgments

The COPD flipchart is an initiative of the Queensland Health Statewide Respiratory Clinical Network and the Menzies School of Health Research and funded by Queensland Health and Menzies School of Health Research, Darwin.

The flipchart was developed in consultation with:

- Indigenous Respiratory Health Work Group, Queensland Health Statewide Respiratory Clinical Network
- Menzies Child Health Division, Indigenous Reference Group
- Chronic Obstructive Pulmonary Disease (COPD) Work Group, Queensland Health Statewide Respiratory Clinical Network
- The Asthma Foundation Northern Territory
- The Australian Lung Foundation
- Department of Health and Families, Northern Territory Government

We need to thank all the many individuals, patients and other health providers who have provided feed back on the flipcharts.

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Suggested Citation:

Queensland Health Statewide Respiratory Clinical Network and Menzies School of Health Research. Educational resource – Adult COPD Flipchart. Darwin, 2011.

ISBN: 987-1-921576-54-6