



COPD: Avoiding Triggers

Information for Patients

What is COPD?

*COPD is a condition that affects the lungs and airways. COPD stands for chronic (KRON-ick) obstructive (ob-STRUCK-tiv) pulmonary (PULL-muh-nair-ee) disease. **Chronic** means the condition is long term. You will have it the rest of your life. COPD usually gets worse over time, but you can learn how to manage it.*

***Pulmonary** refers to the lungs and airways. The condition is **obstructive** because it limits the flow of air into and out of your lungs.*

For an overview of COPD, see the UPMC patient education sheet [COPD: Chronic Obstructive Pulmonary Disease](#).

What is a trigger?

A trigger is any activity or substance that can cause your COPD to flare up. It's important to take active steps to avoid triggers. The following sections tell you about the most common triggers.

Infections

The flu and pneumonia are lung diseases that can be dangerous to you. You should get a flu shot every year in the autumn. The flu vaccine can prevent serious illness and death. Get the pneumonia vaccine as your doctor advises. If you had the pneumonia vaccine before age 65, and that was over 5 years ago, you should get the vaccine again.

To stay healthy, you need plenty of exercise, good food, and rest. Drink fluids to keep mucus thin. It is easier to clear thin mucus from your lungs and airways. Clear airways are less prone to infection. **If you retain fluids or have heart failure, you must use caution in drinking fluids.** Follow your doctor's advice about drinking fluids.

Follow rules of good hygiene. **Wash your hands to avoid infections.** Avoid crowded public places during the flu season. Avoid people who have the flu, a cold, or a sore throat. Keep your nebulizers and inhalers clean. Follow instructions for maintaining your oxygen equipment. Call your doctor at the first sign of infection. The following are signs of infection:

- Your mucus changes in color, consistency, or amount.
- Your wheeze, cough, or shortness of breath gets worse.
- You get a fever or chills.

Air pollution

When you get indoor or outdoor air pollution in your lungs, it can trigger shortness of breath or lead to an infection. Avoid smoke, strong chemicals, and aerosol sprays. Use products that come as roll-ons, pump sprays, and liquids that are unscented. Avoid breathing in dust. Dust regularly with a damp cloth. If possible, have someone else do the heavy dusting and vacuuming.

Keep your furnace vents dust free. If you use an air cleaner, be sure you change the filter as the maker recommends. Keep your home free of molds.

During an air pollution or ozone alert, stay indoors, keep the windows closed if possible, and use a fan or air conditioner. Avoid strenuous activity. Air pollution affects you more when you exercise or exert yourself. Breathing faster and deeper makes you inhale more air pollution. Ozone levels are highest in May through September. Ozone levels also are higher in the afternoon. If ozone levels create a problem for you, limit your outdoor activity to early morning and after sunset. If you react to pollen, stay indoors, keep windows closed, and use a fan or air conditioner on high-pollen days. Call your doctor if you develop breathing problems.

Weather

Cold air can be dry and irritating to the lungs. To warm the air you breathe, cover your nose and mouth with a mask or scarf, and breathe through your nose. If there's not a mask or scarf available, cup your hand, and keep it over your nose and mouth.

During the cold weather season, dry indoor air can be a problem. A continuous feed humidifier on your furnace can be helpful. Be sure you clean it as the maker recommends. It is best to keep indoor humidity at about 40 percent. Your doctor may advise you about other methods to keep indoor air moist.

During the summer months, heat and humidity may cause difficulty breathing. On hot, humid days, stay indoors and use an air conditioner. If your COPD includes asthma (AZ-muh), you may need to be careful about allergies.

Second-hand smoke

Everyone should avoid second-hand smoke. Breathing second-hand smoke can change how the lungs and airways work. The airways may become more easily irritated. When people are exposed to second-hand smoke, their lungs may not work as well later in life. **Do not** allow smoking in your home. If anyone wants to smoke, ask him or her to smoke outside.

Cigarette smoking

One of the most important changes you can make is to **QUIT SMOKING**. Cigarette smoking is a major risk to your health. Smoking leads to shortness of breath and lack of energy. Smoking destroys the air sacs in the lungs. When you smoke, you breathe in nicotine and tars. The tars clog your airways and stay in your lungs. Normally, your airways are cleaned by hairs, called cilia (SILL-ee-uh). But smoking paralyzes the cilia. When the cilia do not work, the harmful matter stays in the airways and lungs. You then get less fresh air into your lungs. Clogged airways and lungs also provide perfect conditions for bacteria to grow.

The bacteria may cause infections. When you smoke, you also breathe in carbon monoxide, which is a poisonous gas. Your blood then carries more carbon monoxide and less oxygen.

Is it too late to quit? Why quit now? **When you quit, COPD does not progress as quickly.** The destroyed air sacs cannot repair themselves, but your body will start to repair in other ways. The cilia start to work again. When less harmful matter blocks your airways, air flow increases. More oxygen gets into your lungs, and more carbon dioxide is able to get out. Your lungs will work to clean themselves, so you may cough more for a while after you quit. Even if you have some lung damage, more oxygen will be carried to your body tissues. For more information, refer to the UPMC patient education sheet [Smoking and Your Lungs](#).

Action plan to stop smoking

In order to quit smoking, you need to do 3 things: Prepare to quit, take action, and stay smoke free.

1. *Prepare to quit.*

Learn what is available to help you stop smoking. You may choose to quit “cold turkey,” to use nicotine or non-nicotine medicines, to join quit-smoking classes, or all of these. Another name for quit-smoking is smoking cessation (sess-AY-shun). “Cessation” means stopping. To learn more about smoking cessation classes at UPMC, call 1-800-533-UPMC (8762).

Cravings. Nicotine is a powerful drug that raises mood, reduces anxiety, and increases alertness. Nicotine causes changes in your brain that make your brain need nicotine. This is called addiction. When you try to quit smoking, the addiction causes you to have withdrawal symptoms.

The most common withdrawal symptoms are:

- lack of concentration
- irritability
- tiredness
- dizziness
- headaches
- craving for cigarettes

Today there are medicines that act as nicotine replacement. These medicines provide some nicotine to help people when they are craving nicotine. Nicotine replacement comes as a gum, patch, nasal spray, inhaler, or lozenge. Also available is a non-nicotine medicine that works on the brain to produce some of the same effects as nicotine. Ask your doctor about these medicines.

Habits. Craving nicotine is not the only hard part of quitting. Most smokers have had daily smoking habits for a long time. To break the habit, you need to change the way you think about smoking. It’s very helpful to develop a plan. Make a list of the times, places, and situations in which you usually smoke. Here are 3 tips to break the habit:

- Do something else during the times when you usually smoke.
- Avoid tempting situations.
- Stick with your effort.

2. Take action.

Set a quit date. Destroy all cigarettes the night before your quit date. Throw away all ashtrays, matches, and lighters. For several weeks, avoid the places where you usually smoked, if possible. Each time you get the urge to smoke, tell yourself that the urge will leave soon. Remind yourself why you want to quit. Try keeping your hands busy. Some people play with paper clips, doodle, handle a coin, or do crossword puzzles. If possible, get up and walk when you feel the urge to smoke. If you need to have something in your mouth, take sips of water, chew ice or sugarless gum, or eat fruit or a low-calorie snack.

3. Stay smoke free.

When you are tempted to smoke, ask for help from your family and friends. Employers, communities, and makers of nicotine and non-nicotine medicines may offer telephone support. Telephone support may help you to stay smoke free.

Pennsylvania has a toll-free Tobacco Quitline at 1-877-724-1090. People with hearing impairment should call 1-877-228-4327.

There is no question that quitting is best for your health. Choose the plan that is best for you. For a complete guide to quitting smoking, see the UPMC patient education booklet Journey to a Smoke-Free Life.

When should you seek help?

If any of the following occur, get medical care:

- Your mucus changes in color, consistency, or amount.
- Your wheeze, cough, or shortness of breath gets worse, even after you take your medicine and it has time to work.
- Your breathing gets difficult.
- You have trouble walking or talking.

Call 911 right away if any of the following occur:

- You get confused.
- You have trouble staying awake.
- Your lips or fingernails are blue or gray.

If you have questions

If you have any questions, call your doctor or nurse at _____.



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For help in finding a doctor or health service that suits your needs, call the UPMC Referral Service at 412-647-UPMC (8762) or 1-800-533-UPMC (8762).

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