COPD in the Elderly

by MS. LAWANA

COPD Risk of Mortality for Aging Adults

There are several reasons why aging adults with chronic obstructive pulmonary disease (COPD) are at a greater risk for mortality. Among the reasons for COPD in the elderly are changes in pulmonary lung function, greater sensitivity to bronchial constriction, and hypoxia with their advanced aging.

COPD is known as a significant disability, and with that in mind, many clinics treat older patients with the acute disease with a pessimistic approach. This is not necessary since there are many treatments now which can assist people with this disease. Additionally, COPD is commonly considered an “older adult” disorder. Therefore, many reviews of diagnosis and management do not address all of the geriatric issues, such as nursing involvement, cognitive impairment, administering medication, and hospitalizations.

Diagnosis and Treatment of COPD in the Older Adult

Spirometry for COPD condition staging is a procedure that can be performed in most older adults. This technique is used to define the diagnosis and help manage the disease. It was made popular by the Global Initiative for chronic obstructive lung disease.

Much of the management of COPD includes stopping smoking, vaccinations, and the use of medications, such as oral steroids and bronchodilators. More advanced treatment options may include oxygen therapy, pulmonary rehabilitation, noninvasive positive airway pressure, osteopenia screening, and even depression screenings.

How Airways Are Affected By COPD

Imagine an upside-down tree. In the pulmonary system, the airways of the lungs branch out just like this upside-down tree. There are small balloon-like air sacs at the end of each branch, called bronchioles. Usually, if healthy, the airways and air sacs are elastic, much like a rubber band. So, when you breathe in and out, it's like a balloon filling up and then deflating. When we are breathing through our nose or mouth, the tubes that carry the air into our airways form the upside-down tree.

With COPD in the elderly, the airways and air sacs lose elasticity, similar to a stretched and stressed rubber band. Of course, this causes less air to go in and out of the lungs. Sometimes, the walls between the air sacs become destroyed, or the airways can become thick, swollen, or even inflamed. Additionally, cells in the airways become clogged, and usually, it's due to the extra sputum or mucus.

COPD Has No Cure But Can Be Controlled

COPD can be mentally draining, but staying positive and keeping it in control is very important in treating this disease. For many people, the shortness of breath along with basic work around the home or even walking, dressing, and bathing can become major chores. It's important to know that this disease takes years to progress.

Many people may be diagnosed in their middle age years, but many more are diagnosed in their older age. Also, COPD is not contagious - you cannot “catch” it from anyone else.

Managing and Living With COPD

Being married is a plus when it comes to monitoring a disease such as COPD. A spouse can assist the one who has this disease, especially when it comes to symptom monitoring. Self-management is vital to keeping this disease under control. When self-managing, it's important to keep a schedule with medication, stay aware, and maintain a safe environment in case of fainting or falls. Many people may find it beneficial to go to “Help Groups” for COPD, especially people who have depression or anxiety due to the disease.

- **Pursed lip breathing** – Pursed lip breathing can be an effective strategy for older adults with COPD, and doctors recommend this measure as an effective method for managing an episode of shortness of breath. However, many elderly patients say it is the least effective method of help.
- **Lansoprazole** – This drug is a proton pump inhibitor, and it shows promise as a type of therapy for COPD exacerbations among older patients. However, it is still in the research stage.
- **Other strategies** – Respiratory exercise, strength training, and education are all important for elderly COPD patients. Arm curls and chair stand tests help determine strength. A positive attitude and educating yourself are two of the most important steps in keeping this disease under control.