Debunking Myths About COPD

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Is COPD Contagious? And Other Myths About COPD

One of the downsides of learning about chronic obstructive pulmonary disease (COPD) is there are many myths and mistruths that unfortunately people fall into the trap of believing.

So, I thought I'd go about debunking some myths and replacing them with some thought-provoking ideas.

Is COPD Contagious?

COPD is not a contagious disease at all. It is a chronic obstructive disease of the lungs or airways, in which the damage is structural.

You can be safe in the knowledge that associating with a COPD patient will not put you at risk.

It is, however, very important that if you are suffering from a cold or flu, you keep clear of a COPD patient. Passing on your illness can cause a severe impact on a patient if they catch your bug.

COPD Is a Smoker's Disease

While many people still think this is the case, the fact is COPD is not a smoker's disease. Yes, smoking is the number one cause of COPD, but there are other reasons why a person is diagnosed.

Long-term exposure to air pollution, chemicals and workplace dust can all cause COPD. Exposure to secondhand cigarette smoke has also been found to be a cause. Non-reversible asthma is also considered COPD.

Alpha-1 antitrypsin deficiency is a genetic condition that can play a role in developing COPD; low levels of alpha-1 antitrypsin, a protein made in the liver, cause this condition.

You Shouldn't Exercise With COPD

For many years, COPD patients found exercise would make them more breathless and would panic about where their next breath would come from. As more information about the benefits of exercise for COPD is released, more patients are adopting a regular exercise regime, which is improving their quality of life.

A sedentary life leads to muscle wasting and a general deconditioning of a patient's level of fitness.

COPD Is a Terminal Disease

There is no cure for COPD and it is a progressive disease. However, by adapting certain lifestyle choices the

progression can be slowed considerably.

Quitting smoking is the best first step to slowing this disease. Patients who continue to smoke after diagnosis are far more likely to experience a worsening of symptoms and greater deterioration of health than patients who quit.

By quitting smoking, adapting a nutritious eating plan and regularly exercising, COPD's progression can be slowed. Early detection has an impact on a patient's disease outcome.

Only Old People Have COPD

It is true the greater population of COPD patients comes from the over 60 age group, but this doesn't mean younger people aren't at risk. I was 45 when first diagnosed and know of patients much younger.

If you are a smoker or have long-term exposure to pollutants, then you are risk and need to take appropriate action. People who have a genetic form of COPD caused by alpha-1-antitrypsin deficiency can get the disease much earlier in life, often from their 30s.

Oxygen Therapy Is the Beginning of the End

For some patients, their lungs are damaged to the point where they must be placed on supplementary oxygen. This doesn't mean the end is near — in fact, many patients are still able to slow the progression of their disease when placed on supplementary oxygen.

In the past, this would impact greatly on a patient's mobility. Nowadays, with smaller and more portable oxygen units, many patients can maintain their mobility. More and more patients are now using these smaller units so they can keep exercising.

Asthma Is COPD

Asthma is a disease of the airways that can cause similar symptoms as COPD. However, when asthma is completely reversible by medication it cannot be considered COPD.

In some cases, long-term chronic asthma can develop into COPD. This is when medication no longer reverses the airway obstruction and it becomes a fixed or permanent obstruction. Spirometry testing is used to determine whether a patient has asthma or COPD.

Medication Is the Only Treatment for COPD

There are several treatments that can be used for COPD, including medication, oxygen therapy, pulmonary rehabilitation and nutrition.

Constructing a good management plan with your doctor that incorporates multiple treatment options can have beneficial effects to the quality of life for a COPD patient.

I'm Breathless Because I'm Getting Older or I'm Not Fit

There are many reasons why we can become breathless and many people put it down to age or being physically unfit.

If breathlessness is a condition you are experiencing all the time you should visit your doctor, as it is one of the main symptoms of COPD. Your doctor will be able to determine the cause and treatment options.

Quitting Smoking Will Reverse My COPD

I have heard many people say after you have been diagnosed with COPD giving up smoking will reverse the disease. Unfortunately, this is not the truth.

While giving up smoking when you have been diagnosed with COPD is the best change you can make, the fact is the damage to your lungs is permanent.

The Bottom Line

These are some of the myths I hear about COPD. While some readers will think these are obvious misconceptions, for many newly diagnosed patients working out what is fact and what is fiction can be difficult.

In many cases, myths can be dispelled if you take the time to research what you are being told. For newly diagnosed patients, don't be afraid to write a list containing questions relating to your disease.

This list can be explained clearly to you when you visit your doctor next. When receiving advice about COPD from sources other than your doctor, be sure to check their validity on your next visit.

Be aware of people pushing miracle cures for COPD on the internet, and remember your doctor will be the best resource for any new developments in the management of your disease.

You are your own best indicator with this disease and what works for some patients doesn't necessarily work for others. Gain as much knowledge as you can about COPD — knowledge is power and will better equip you for the journey ahead.