



Fact or Myth: Can COPD Be Cured?

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Can COPD Be Reversed?

There are approximately 65 million people with moderate to severe chronic obstructive pulmonary disorder (COPD) worldwide. Experts believe that this number is only expected to rise over the next 50 years. In the U.S., approximately 16 million Americans have COPD, and many Americans are unaware that they have it.

Many people who are initially diagnosed with this condition may wonder, “can COPD be reversed?” In this article, we look at how symptoms can be managed, and what triggers to avoid.

What Is COPD?

COPD is a progressive lung disease that causes airway obstruction. It combines chronic bronchitis and emphysema.

Bronchitis

Bronchitis causes inflammation of the airways. When bronchitis becomes chronic, the bronchi are inflamed most of the time.

In 2016, more than 8.9 million Americans were diagnosed with chronic bronchitis. Nearly all those cases were people over the age of 45 (75%). Women are about twice as likely to develop chronic bronchitis than men. Comparatively, in 2016, 5.9 million women were diagnosed, while 3 million men were diagnosed.

Emphysema

The alveoli are tiny air sacs in the lungs that assist with air exchange. When these air sacs become damaged, emphysema is said to occur. When emphysema occurs, the lungs lose their elasticity, becoming stretched out.

Can COPD Be Cured?

COPD is said to be progressive; this is because it worsens with time. As such, COPD cannot be reversed.

In a 2011 article published in Science Daily, researchers noted that very little headway had been made in COPD research over the past 20 years. However, Norbert Weissman of the University of Giessen Lung Center in Germany had studied mice with emphysema and noted that hypertension typically precedes the development of COPD. They also noted that nitric oxide (NO) may play a part.

According to Weissman, “Nitric oxide (NO) and the nitric oxide system are important for opening up blood vessels and maintaining vascular tone . . . Simply put, peroxynitrite can modify protein functions, leading to the destruction of lung tissue.”

To simplify, identifying that nitric oxide levels may play a part in COPD may lead to better therapies, as well as prevention.

At this time, we know that COPD progression can be halted. There are many steps that can be taken to greatly slow its progression and to reduce symptoms.

Managing COPD

Treatment of COPD is typically a multifaceted approach, and combines medications, exercise, avoiding triggers, and smoking cessation.

Exercise

If you have never been one to exercise, you do not need to sign up for a 5-kilometer run in order to become healthier.

A great exercise program can be:

- A warmup
- Cardiovascular exercise, such as walking or biking
- Strength training

If it is difficult to devise an exercise routine, consult a professional. Your healthcare provider may also recommend pulmonary rehabilitation. Pulmonary rehabilitation can gradually increase your ability to exercise, as well as teach you various breathing exercises.

Medication

If you are diagnosed with COPD, it is likely that your healthcare provider will prescribe you medication. COPD medication is used to keep your airways open so that you can breathe, reduce airway inflammation and keep mucus production at bay.

COPD medication regimens are tailored to each individual. The regimen should promote better breathing, a reduction in flare-ups, and it should allow you to participate in daily activities.

Common medications:

- **Bronchodilators:** These medications help the airways relax, which allows them to stay open. These medications are typically delivered via an inhaler or a nebulizer and can be long-acting or short-acting.
- **Anti-inflammatory:** Anti-inflammatory medications assist with reducing inflammation of the airways. These can be found in the form of an inhaler or an oral medication. If used as an oral medication, your healthcare provider will typically prescribe for only a short time due to side effects.
- **Combination medications:** Combination medications combine anti-inflammatory medications with bronchodilators.
- **Antibiotics:** Antibiotics are prescribed when your healthcare provider suspects a bacterial infection. Preventing upper respiratory illnesses is especially important, because they can cause a COPD flare-up.
- **Vaccinations:** Preventing illness overall can prevent COPD flare-ups.

Avoiding Triggers

Everyone with COPD has different triggers. Identifying your triggers and subsequently avoiding them can improve your symptoms.

Common COPD triggers:

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- Cigarette smoke
 - Temperature variations, such as very cold, very hot, and humid weather
 - Air pollution
 - Respiratory infections, such as influenza
 - Dust and fumes, such as perfumes, candles, bug spray, and hair products
 - Wood smoke

Stop Smoking

Smoking is the leading cause of COPD. It is known to cause 85% to 90% of COPD cases. The Centers for Disease Control and Prevention (CDC) reports that 38% of the 16 million Americans living with COPD are current smokers.

Unfortunately, secondhand smoke exposure can also play a part. Secondhand smoke exposure during childhood can slow lung development, increasing the risk of developing COPD later in life.

You've probably been told to quit smoking for various reasons over the years. For the health of your lungs, you should quit smoking. You should also avoid secondhand smoke exposure.

Final Notes

While COPD cannot be reversed, there are different ways that you can manage your symptoms. There are also many triggers that you can actively work to avoid, which will lessen the likelihood of developing COPD.

Be sure to speak to your doctor about creating a treatment plan if you have been diagnosed with COPD so you can manage your specific symptoms.
