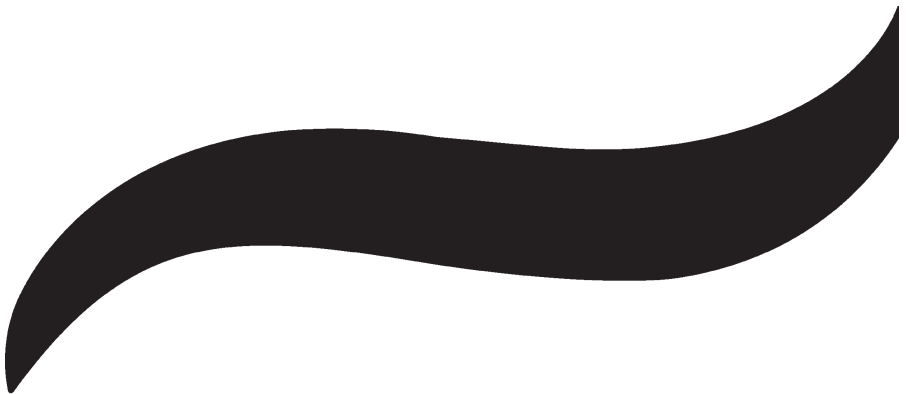




# Pulmonary Rehabilitation Education Booklet

Information for patients  
Acute Services



# CONTENTS

♦ Introduction.....	3
♦ What is Chronic Obstructive Pulmonary Disease (COPD )?.....	4
♦ Medication.....	6
♦ Recognising the warning signs of a chest infection.....	6
♦ Treatments you may expect to receive.....	8
♦ Smoking Cessation.....	9
♦ Staying in Control of Your Breathing.....	12
♦ Breathlessness scale.....	16
♦ Recovery Positions.....	18
♦ Causes of Breathlessness.....	19
♦ The Benefits of Exercise.....	23
♦ Reassessment.....	27
♦ What is anxiety?.....	28
♦ Relaxation.....	32
♦ Breathing and energy conservation.....	35
♦ Assistive Equipment and Adapted Techniques.....	37
♦ Eating for good health.....	38
♦ What happens if I get a lot worse.....	41
♦ Travel advice.....	42
♦ Getting out and about.....	43
♦ Education.....	45
♦ Topics.....	45
♦ Support Groups or Voluntary Organisations.....	45
♦ Useful contacts.....	46

## INTRODUCTION

Self-Management and Pulmonary Rehabilitation is a programme of education and exercise for people who experience shortness of breath because of lung disease.

The education programme increases your knowledge of your condition allowing you to cope with it better.

The exercise programme is designed to increase your level of fitness. This will allow you to carry out your daily activities feeling less short of breath.

The exercise classes run twice a week. Each class is approximately 1 hour long. The complete programme runs for 12 sessions. We will also give you an exercise diary to work on at home.

A physiotherapist, nurse and multi-disciplinary team members will run your programme.

We will encourage you to ask questions during your classes.

At the end of your programme we will reassess you to monitor your improvement. We will offer you the chance to maintain your new level of fitness by attending Active Health classes at your local leisure centre.

This booklet contains the topics covered in your education sessions. You should read it in conjunction with the Chest, Heart and Stroke Scotland booklet 'Living with COPD' which we will give you. Each booklet gives different information.

### **Please Note:**

Not all these details apply to every patient. Please ask the staff if you have any questions.

# WHAT IS CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)?

Your doctor may have told you that you have a chest condition called COPD.

COPD is a shortened name for Chronic Obstructive Pulmonary Disease. It is an umbrella term used to describe people with either Chronic Bronchitis and or Emphysema.

COPD stands for:

- ♦ **Chronic** means that the disease is long standing
- ♦ **Obstructive** means that the airways are narrowed
- ♦ **Pulmonary** relates to the lungs
- ♦ **Disease** means simply an illness

Unfortunately COPD is a common condition affecting the lives of thousands of people in Scotland and many more people worldwide, the symptoms of which can be very debilitating and distressing to both the patient and their families.

## WHAT ARE THE SYMPTOMS OF COPD?

Breathlessness is due to less oxygen reaching the body because the air passages are narrower and damaged. The body pushes the lungs to work harder to try to get the oxygen they need.

**Cough** the lungs are trying to get rid of the phlegm.

**Excess Phlegm (spit)** caused by the airways producing extra mucus in a response to the irritants.

**Wheeze or noisy breathing** - The airways are narrowed because of inflammation of the inside of the airways, tightening of the muscles around the airways and the extra mucus. This can make breathing sound noisy especially on exertion.

**Fatigue** is due to muscle changes related to your lung condition and lack of activity.

You may be aware of one or more of the above symptoms every day. These symptoms can also change during an exacerbation which is a worsening of your condition. This booklet tells you more about the warning signs.

The symptoms of COPD tend to appear gradually. You may have had damage to your lungs for a long time before you seek help from your GP, as your symptoms may only have been mild.

On occasion the symptoms will appear suddenly. This is usually following illness such as a chest infection that never seems to go away. There is more information about this in the “Living with COPD” booklet (Chest, Heart and Stroke Scotland).

## **MEDICATION**

There are many different medications that your doctor may prescribe to help manage your COPD (Chronic Obstructive Pulmonary Disease). Unfortunately there are no medicines that will cure your breathing problem but they should help to control the symptoms of your lung disease.

At the education sessions you will learn more about your medications. There is more information regarding your medications in the 'Living with COPD' booklet (Chest, Heart and Stroke Scotland).

## **RECOGNISING THE WARNING SIGNS OF A CHEST INFECTION**

When your lungs are damaged you are more likely to suffer from chest infections. With every infection there is a risk of further damage to the lungs. Because of this it is important to know when an infection is beginning and get treatment from your GP as soon as possible. You should also try and avoid infections as much as you can.

If you do have an infection or your lung disease is worse than normal then do not attend your Pulmonary Rehabilitation class. We will not allow you to exercise. You should wait until you feel better and have completed any medications (antibiotics or steroids) that your GP may have prescribed before returning to the class.

## **SIGNS OF CHEST INFECTION**

Your doctor may use the words exacerbation of COPD, this can mean inflammation of the airways with or without infection.

- ◆ An unusual increase or decrease in amount of sputum
- ◆ A change in sputum colour to yellow, green or brown
- ◆ A change in the thickness of sputum
- ◆ Increased breathlessness
- ◆ High temperature or hot/cold flushes
- ◆ Increased cough
- ◆ Cold or flu like symptoms
- ◆ Increase in tiredness

## **DO NOT IGNORE THESE SIGNS. SEE YOUR GP IMMEDIATELY.**

You should make an emergency appointment to see your GP as soon as you notice any of these new symptoms or use the rescue pack of medications if these have been supplied to you by your GP.

When telephoning for appointments explain that:

- ◆ You have COPD.
- ◆ Your chest condition is worse, mention any changes in sputum.
- ◆ You need an appointment as soon as possible.
- ◆ If there is no emergency appointment available, ask for a house call from your G.P or if out with GP surgery hours or a holiday contact NHS 24 (phone 111)

## TREATMENTS YOU MAY EXPECT TO RECEIVE

- ♦ Antibiotics - to help fight off the infection.
- ♦ Steroid tablets - to reduce inflammation in the lungs allowing you to breathe easier.
- ♦ Nebulised Salbutamol - to help keep your airway open to assist with your breathing

You should take things easy during an infection and rest.

If you have been given antibiotics and or steroid tablets to keep at home, make sure that you start taking them within 24 hours of noticing these symptoms and if your symptoms worsen make an appointment with your GP as soon as possible.

If you have a chest infection and develop slurred speech, confusion or irritability then please seek further medical advice immediately whether with your GP or NHS24.

## OTHER WARNING SIGNS

- ♦ Other symptoms that you shouldn't ignore
- ♦ The developing or worsening of swollen feet and ankles
- ♦ Blood in your sputum
- ♦ Changes in your sleeping habit - awake all night and asleep all day

A coloured leaflet is available that explains the Traffic Lights warning signs in COPD.

### Remember

Treating the infection early can help to prevent further problems and hospital admission. Take note of your normal symptoms and get advice from your GP or Practice Nurse when any of these appear abnormal. If you are experiencing recurrent chest infections, obtaining a sputum sample and sending it to your GP would be beneficial.



**SUGGESTIONS TO TRY TO AVOID GETTING AN INFECTION AFTER THIS.** There is no guaranteed way of preventing infections; however there are some ways to reduce the risk.

- ◆ Stop smoking or avoid passive smoking.
- ◆ Avoid crowded rooms
- ◆ Take your inhaler therapy as prescribed
- ◆ Stay away from family and friends who have the cold or flu.
- ◆ Get your flu jag or pneumonia jag.
- ◆ Keep active.
- ◆ Eat healthily.
- ◆ Avoid cold, misty mornings.

## **SMOKING CESSATION**

It's never too late to stop smoking and it can make a real difference...



**Stopping smoking is one of the best things you can do if you have COPD.** By continuing to smoke you will speed up the damage to your lungs which can make breathing more difficult and uncomfortable and may cause chest infections.

## **WHY IS QUITTING SMOKING DIFFICULT?**

- ◆ It's an addiction: tobacco contains a chemical called nicotine which the brain gets used to.
- ◆ Smoking quickly becomes part of your daily routine: first thing in the morning, with coffee or tea, after a meal etc. It can sometimes be difficult to break these patterns.
- ◆ If you have smoked for a long time, you might be worried about how life would be without smoking.
- ◆ People often worry about withdrawal symptoms when they quit.

## **WHY BOTHER?**

- ◆ Stopping smoking increases the amount of oxygen getting into your body, giving you more energy and making you feel good!
- ◆ No matter what age you are, quitting smoking has benefits for your health and quality of life...
- ◆ ...and your wallet! You'll save loads of money if you quit. Lots of people put the money they save aside and treat themselves to something nice.
- ◆ Taste and smell improve.
- ◆ Sense of achievement! Lots of quitters feel great after quitting as it can be really difficult to do.

## **WHO CAN HELP?**

Quitting smoking can be hard and a bit daunting but there's loads of help available to make it easier.

- ◆ Stop Smoking Groups: combining support of trained advisers and other quitters with nicotine replacement therapy or other products to help you quit. These groups are good fun, run locally and free.
- ◆ Local pharmacies (chemists) offer brief support and nicotine replacement therapy to help you quit in a convenient, drop in service.

You can also phone Quit Your Way for help and advice on stopping smoking on 0800 84 84 84 or visit [www.QuitYourWay.Scot](http://www.QuitYourWay.Scot)

Text QUIT to 83434 for a quit pack or text CALL to 83434 for an adviser to call you back

**You can do it... and we can help!**

## STAYING IN CONTROL OF YOUR BREATHING

Breathlessness can be very distressing or frightening. It can leave you gasping, panicking and wondering where the next breath is coming from. Your family and friends may feel helpless watching you. This can occur now and again or every day; sometimes very severe, sometimes mild but both can be upsetting.

The following section gives you information to help you gain control of your breathing and other options you can use to help yourself.



These include:

- ◆ Relaxed or Controlled Breathing Pattern
- ◆ How to control your breathing when doing activities
- ◆ How to control your distress
- ◆ Breathlessness Scale - a recovery tool
- ◆ Recovery positions
- ◆ Chest Clearance

**“Breathing is the basic rhythm of life”**

Hippocrates

## **CONTROLLED BREATHING OR RELAXED BREATHING PATTERN**

A good breathing rhythm and pattern is crucial to staying in control. Use the following guide to practice controlled breathing when you are feeling good and your breathing is in control.

1. In a comfortable sitting position relax your upper chest and shoulders
2. Place one hand lightly on your stomach just below your rib cage.
3. Breathe in, feeling your stomach rise against your hand.
4. Breathe out gently feeling your stomach fall flat under your hand.
5. Repeat 3 or 4 times

Do not force your breath, you should feel relaxed doing this.

You should not feel worse for doing this. If you do, ask your physiotherapist to check what you might be doing wrong.

**Repeat this 3 or 4 times per day.**

This breathing pattern can help control your breathing in a rhythmic and relaxed manner. As soon as you or someone else notices the rhythm of your breathing is changing use this relaxed breathing pattern.

## **WHAT CAN AFFECT YOUR BREATHING PATTERN**

Your breathing may lose its rhythm in a number of ways. Here are just a few examples of how you may feel when you have lost control of your breathing and what steps you may take to help you recover your breathing.

### a. Rapid shallow breathing

- ◆ Gasping
- ◆ Taking too many fast breaths
- ◆ Panicking
- ◆ Anxious

**Solution:** You need to take slower, slightly deeper breaths in a comfortable supported position, i.e. sitting in a chair. This should mean that your breath out is longer than the breath in.

### b. Feeling dizzy or light headed

If you have been blowing out excessively forcing your lungs to empty before you take the next breath it can make you feel light headed, dizzy or faint.

**Solution:** Blow a smaller amount of air out.  
Listen to your breathing to get back in rhythm.

### c. Holding your breath

You may not notice that you are holding your breath at first, but this is followed by rapid breathing, (sudden awareness of gasping), and struggling to get a breath.

**Solution:** To return to a normal breathing pattern, try not to hold your breath. People often have a tendency to do this before effort i.e. climbing stairs. Try to breathe in rhythm. 'Blow as you go'.

### d. Unable to breathe in

If your breathing pattern changes and you fill your lungs it becomes a struggle to breathe. You keep trying to take more in but there is no space. This can be distressing, your chest will be over inflated and can lead to panic.

**Solution:** You must breathe out, empty some air from your lungs to allow the next breath in.

## **HOW TO CONTROL YOUR BREATHING WHEN DOING ACTIVITIES**

Use the following guide:

- ♦ Move to the rhythm of your breathing. Tune into your breathing rate and time your steps as you walk, for example “in for three steps and out for four or five.”
- ♦ Breathing out on exertion often helps - when bending or when raising arms above your head.
- ♦ Pacing is very important to give rhythm to breathing. When you reach up, breathe out. If you walk too quickly, your lungs cannot keep up. Do an activity at a pace which keeps pace with the lungs and your breathing - breathing in rhythm is very useful to learn.

## **HOW TO CONTROL YOUR BREATHING**

Some patients experience distress associated with their breathing. They also think that this is normal and they have no choice in how distressed they feel. But you do have a choice. By paying attention to your level of breathlessness and following the instructions below you can feel less distressed and more in control.

### **♦ Pacing activities**

Pacing yourself when doing activities is really important. If you hurry then you will almost certainly get out of breath. For some people this may mean changing the habits of a lifetime. If you can go at a slower pace then your breathing will be able to keep pace. Sometimes you will have to stop for a rest.

### ◆ Rest periods

Sometimes when you get breathless you cannot get your breath back without stopping the activity you are doing. When you do stop, your breathing may get worse before it gets better. Some of you may recognise this when climbing stairs. When you get to the top you think you have made it! Then your breathing gets worse even although you are no longer active. This happens because the body has used supplies of oxygen that have to be paid back, sometimes called “Buy now, pay later”. Your breathing gets progressively worse as you are active and you should try to learn to recognise your limit.

A Breathlessness scale can help you do this.

## **BREATHLESSNESS SCALE**

We use the breathlessness scale to measure your breathlessness and also as a recovery tool for your breathing.

The aim is to be no more than moderately breathless (i.e. a score of 3) in whatever you are doing. This will mean that you can be active but still in control of your breathing and you can recover comfortably when you stop. You should be able to talk a little when you are active, if you can't you need to slow down and go at a slower pace.



It is a score of 2 halves:

**Breathlessness scale**

<b>In control</b>	0	Nothing at all
	0.5	Very, very slight
	1	Very slight
	2	Slight
	3	Moderate
<b>Out of control</b>	4	Somewhat severe
	5	Severe
	6	
	7	Severe
	8	
	9	Very, very severe
	10	Maximal

Breathlessness score 0 to 3 describes increasing breathlessness with 3 being as out of breath as possible but still in CONTROL.

Breathlessness score 4 or 5 means you are no longer in control, you feel distressed. You wish you hadn't gone there.

Breathlessness score 6 to 8 means you become anxious and this makes the breathing even worse.

Breathlessness score 9 and 10 is where panic adds to the breathlessness with this situation feeling the worst possible.

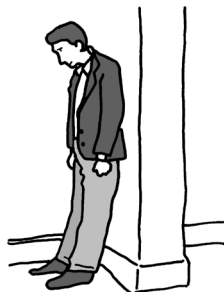
To stay in control of your breathing you have to do the following:

- ◆ Pay attention to your breathing.
- ◆ Pace your activity.
- ◆ Choose the right time to stop.
- ◆ When your breathing has recovered to 0 or 0.5 you can restart your activity.

These steps will allow you to stay more in control of your breathing.

**You must also remember that to get out of breath is OK, but to be out of control or distressed by your breathing is not!**

## RECOVERY POSITIONS



Many people who feel breathless will automatically move into a position that eases their breathing. These different positions may help for different situations.

1. Stand leaning forward with your arms resting on a ledge, e.g. a window sill, bench or banister rail.
2. Lying on your side with several pillows under your head and one under your upper arm. Remember to try both right and left sides. This position is particularly helpful if you experience breathlessness at night while sleeping.
3. Sit on a chair and lean forward with both arms resting on your thighs with your wrists relaxed or resting your forearms on a table in front of you. You may feel more comfortable sitting with your back supported in the chair and forearms on your thighs
4. Lean backwards against a wall with your shoulders relaxed and arms resting by your side. Your feet should be 12 inches away from the wall (or as far as is comfortable) and slightly apart. This can also be done by leaning sideways on to the wall using the upper arm.

## **CAUSES OF BREATHLESSNESS**

Breathlessness can have different causes and these may occur together.

1. Wheeze or tightness in your chest  
(see Medication section, page 3)
2. Loss of rhythm of breathing  
(see Staying in Control of Your Breathing section, page 7)
3. Phlegm or mucus (see Chest Clearance section, page 15)

These causes are summarised in the chart - Why am I struggling to breathe?

## Why am I struggling to breathe?

<p>Do I feel tight or wheezy?</p> <p>↓</p> <p>Reliever inhaler</p> <p>See page 3</p> <p>↓</p> <p>I feel better</p>	<p>Am I gasping or panicking?</p> <p>↓</p> <p>Positioning breathing control</p> <p>See page 7</p> <p>↓</p> <p>I feel better</p>	<p>Do I feel mucus or phlegm in my chest? Choked? Difficult to cough and spit?</p> <p>↓</p> <p>Use chest clearance technique to clear your chest See page 15</p> <p>↓</p> <p>I feel better</p>
<p>You have to be a detective to work out which of the three are causing your breathlessness. Once you have done this you should then follow the suggested instructions.</p>		

## CHEST CLEARANACE

Some patients have troublesome phlegm, (sometimes called mucus) others have very little to cough. If you have phlegm, it is useful if you can learn techniques to help clear it from your chest. For some this may be every day or several times a day or only when you have infections.

It is important to keep your chest clear of phlegm to allow you to breathe easier especially when you develop a chest infection. A build up of phlegm may block the flow of air to the lungs and may increase the number of chest infections you get. Coughing can cause tightening of the airways and therefore coughing too much or too hard can make you more breathless and may bring on wheezing. Coughing can also exhaust you.

The 'Living with COPD' booklet (Chest, Heart and Stroke Scotland) describes two chest clearing techniques.

Your physiotherapist can show you ways of clearing your chest without tiring you out.

The following can help the phlegm loosen which then helps you to clear your chest.

**Fluid** - We recommend drinking 8-glasses of water per day. This will help to keep up the fluid levels in your body and assist in helping to thin the phlegm which in turn will make it easier for you to clear your chest. Try to reduce or avoid drinks with caffeine as this will dehydrate you further.

**Humidification** - Steam inhalations may help to humidify and moisten the airways in your lungs. By breathing in the steam you will thin down the phlegm allowing it to move more easily

You can do this by adding Vic balm, or eucalyptus oil to a bowl of hot water (not boiling) and placing a towel over your head.

**Nebuliser** - If you use a nebuliser to take inhaled medication, placing saline (salty water) in your chamber may help to loosen your phlegm making it easier to clear your chest. Your doctor has to prescribe the medicine.

Using these suggestions with your preferred chest clearance technique should result in more effective chest clearance

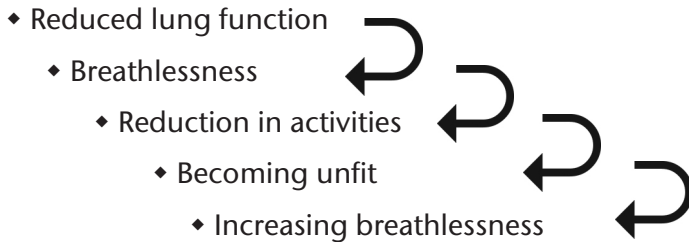
If you are struggling to clear your chest please ask your nurse or physiotherapist in class. There is also medication that your GP can prescribe to help with chest clearance.

# THE BENEFITS OF EXERCISE

Exercise is important to keep the body healthy, improve confidence, and help reduce any anxiety.

Breathlessness is one of the major symptoms that people with COPD experience. This is an unpleasant symptom that can lead you to avoiding activities, which can also affect personal motivational levels. Avoidance of activities leads to a decrease in your general level of fitness, which means that you experience breathlessness at a lower level of activity. This starts a downwards spiral of restricted activity leading to a decrease in general fitness and ability, which then leads to a greater level of breathlessness.

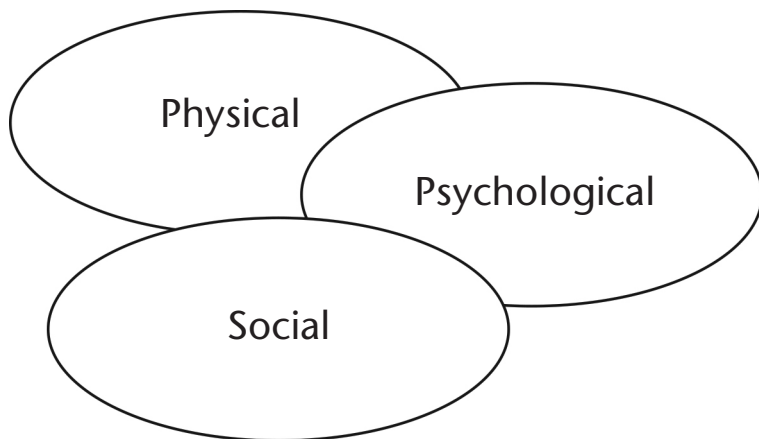
## The cycle of inactivity



Pulmonary rehabilitation sets out to break this cycle and improve your level of fitness and ability to carry out everyday activities.

Exercising your muscles will make them stronger and more efficient. You may also find that by exercising you can relax more easily with a sense of well being and your sleeping pattern improves. Together with increasing confidence you could find it easier to do more tasks.

## BENEFITS ARE THREEFOLD



### Physical

If you exercise regularly you may benefit from some of the following:

- ◆ Feel better
- ◆ Sleep better
- ◆ Improve posture
- ◆ Lower cholesterol level
- ◆ Improve or prevent osteoporosis
- ◆ Improve your appetite
- ◆ Lower high blood pressure
- ◆ Reduce general aches and pains
- ◆ Be stronger and more flexible

Muscle strength and endurance can improve with exercise. The aim is to get you to the best level you can manage.



## Psychological

- ♦ Reduce fear of breathlessness
- ♦ Increase control over breathlessness
- ♦ Reduce anxiety and depression
- ♦ Exercise helps to lift your mood.
- ♦ Increase confidence

## Social

Pulmonary rehabilitation classes provide an opportunity to meet with other people in a similar position.

- ♦ Sharing experiences can be beneficial.
- ♦ Returning to previously enjoyed activities
- ♦ Increasing your activities

It is never too late to start exercising; a little exercise is of more benefit than no exercise at all. To maintain your new exercise levels you achieve in class you must exercise regularly.

We will give you a separate booklet to guide your exercises at home. Regular exercise does not have to be in a class format and you should include short walks in your exercise regime.

## **BENEFITS**

Research has shown that exercise can help in the following areas

- ◆ Reduce feelings of breathlessness
- ◆ Improve exercise performance
- ◆ Improve health status
- ◆ Reduce risk of chest infections
- ◆ Reduce hospital admissions
- ◆ Reduce length of stay in hospital

(American Thoracic Society /European Respiratory Society May 2006)

## **REASSESSMENT**

When you are near the end of your Pulmonary Rehabilitation programme, the staff at your class will discuss reassessment.

At reassessment we will ask you to complete the questionnaires that you had at your first appointment. We may also ask you to do one final walking test, again the same as at your first appointment. The physiotherapist or nurse will let you know how you have done and will send a report to your GP and hospital Consultant if you have one. Having completed your Pulmonary Rehabilitation programme you should feel fitter and it should be easier to manage your everyday activities. You should also have more knowledge about your chest condition. They will also discuss the options available to you on how you can continue to exercise. It is important to remain active and incorporate exercise into your weekly routine to maintain maximum benefits gained during pulmonary rehabilitation.

## **ACTIVE HEALTH CLASSES**

At this point we will offer you the chance to attend Active Health classes. These classes take place in your local Leisure or Sports Centre.

Due to other commitments, not everyone will be able to take up one of these options and therefore we encourage you to exercise at home. Your Physiotherapist will discuss this with you.

Walking is very important to keep you fit after completing your class. It is important to select your day carefully according to the following:

- ◆ Is your breathing good enough for you to manage to walk?
- ◆ Is the weather good enough, no wind, rain or snow?

Remember to keep your fitness level you must keep exercising.

## **WHAT IS ANXIETY?**

Anxiety is your body's natural response to a situation that you see as threatening or stressful.

In certain circumstances fear and anxiety are helpful because they prepare you to cope with danger or threat. In this situation, stress hormones are released (for example, adrenaline) which lead to physical and mental changes. These prepare you for action, for example, to get away from a dangerous situation or take a challenge. Once danger has passed, these temporary changes subside.

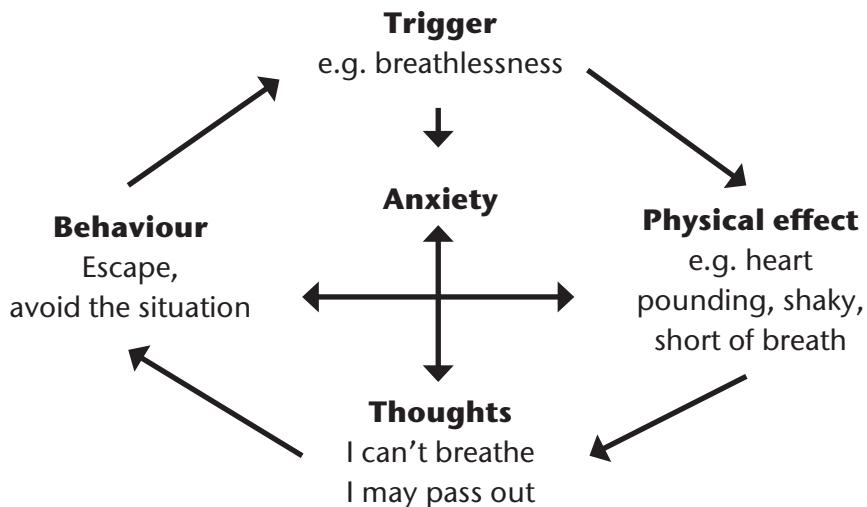
However, many of the stresses faced today tend not to be life threatening e.g. money problems, ill health. Nevertheless, your body still reacts as if there is a threat and you feel the physical effects of that reaction, for example, heart palpitations, butterflies in the stomach, feeling dizzy.

Breathlessness can feel very frightening and can lead you to feel worried, anxious or fearful about your health. In people with COPD it is often breathlessness that is the main cause of anxiety.

Many people with breathlessness also report having panic attacks. These may occur occasionally or for some people they may happen every day. Panic attacks are a form of anxiety that feel very intense and may come out of the blue or be triggered by breathlessness. There is usually a frightened feeling associated with panic that something awful is about to happen.

Unfortunately, anxiety and panic can make you more breathless and can also lead you to avoid situations or stop doing things.

A vicious cycle can therefore develop which keeps anxiety and panic going:



## COPING WITH ANXIETY AND PANIC

There are several things you can do to break the vicious cycle of panic and to manage times when you feel anxious. They may take some practice so stick at them and find out what works best for you.

1. **Identify the triggers** - If you tend to rush things this can make your breathlessness worse and might trigger you to panic. Plan your activities and remember to pace yourself.
2. **Tackle the frightening thoughts** - Remember that what you are feeling is nothing more than an exaggeration of the normal bodily reaction to stress. These feelings are not harmful or dangerous - just unpleasant. Nothing worse will happen. Try to focus your mind away from anxious thoughts, for example:
  - a. Distract yourself - focus on what is going on around you instead of on your body and what might happen. Listen carefully to someone talking or to the radio or try counting backwards in your head – work out what helps you distract yourself best.
  - b. Question the frightening thought - For example, ask yourself ‘How many times have I had these thoughts and how many times have they come true?’
  - c. Reassure yourself - tell yourself that you are not in danger and that nothing bad is going to happen to you. Wait and give the fear time to pass without fighting it or running away from it. Notice that once you stop adding to it with frightening thoughts, the fear starts to fade away.
  - d. If you become breathless in public, then it is often made worse by feeling worried by what others may think of you. Try to tell yourself that even if someone is glancing over at you, often they are more concerned about their own thoughts than about you. Concentrate on what you need to do to recover your breathing control.

3. **Relaxation** - focus on what is happening to your body
  - a. Try to relax tense muscles and try to control your breathing. Remember what we taught you in your Pulmonary Rehabilitation Class about relaxation and breathing control.
  - b. Practice relaxation and breathing control when you are calm. This will make it easier to put them into practice if you feel anxious.
4. **Try not to avoid situations due to anxiety** - Learn that you can control your anxiety in these frightening situations and gradually start doing the activities that you may have stopped because you were worried about having a panic attack.

## **DEALING WITH OTHER FEELINGS**

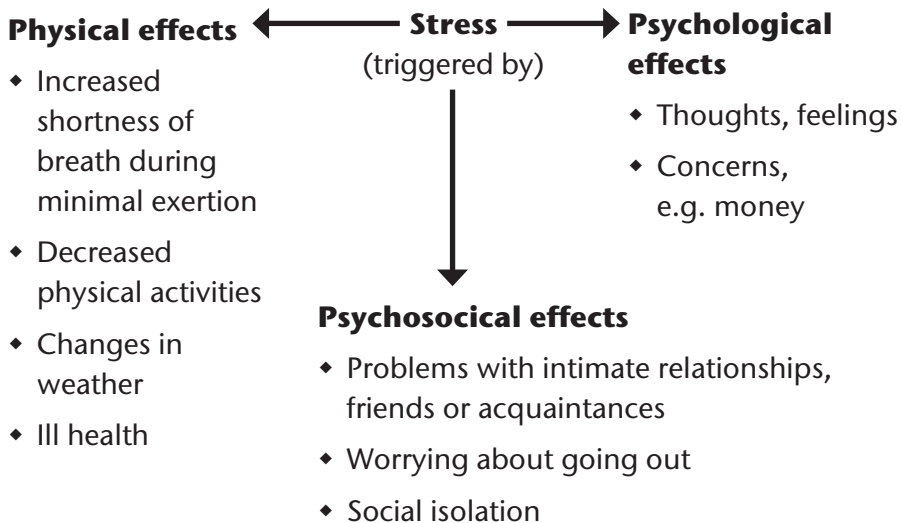
As a consequence of living with a chronic chest condition you may experience a range of other feelings at times. These may include:

- ◆ Feeling low, fed up, sad or depressed
- ◆ Feeling frustrated, irritable, angry or short-tempered
- ◆ A loss of confidence in yourself or everyday activities

# RELAXATION

Relaxation is an effective coping skill for dealing with stress, anxiety, reducing breathlessness and easing muscle tension.

## What is stress?



## WHY IS RELAXATION HELPFUL?

- ◆ A relaxed body requires less oxygen than a tense one.
- ◆ Relaxation eases tension in the muscles which can cause headaches, tight chest etc.
- ◆ Aches and pains or tension can make you become more anxious and tense causing a vicious cycle.
- ◆ Relaxation can help reduce feelings of anxiety and panic.



## **GUIDELINES FOR RELAXATION**

- ♦ Relaxation is a skill that you have to learn therefore you need to practice every day.
- ♦ Try to develop a routine of regular relaxation.
- ♦ It is important that you have peace and quiet whilst practicing relaxation so choose the best time and place for you.
- ♦ You can do relaxation whilst sitting or lying as long as you feel comfortable and supported. Make sure the room is not too warm or too cold and perhaps have a light cover over you in case you fall asleep.
- ♦ Try to breathe slowly in and out in a rhythmical manner whilst you are practising relaxation.

We can give you a CD to help with the practical side of relaxation. If you do not like this way of relaxation try other methods, but don't give up.

## **DIFFERENT WAYS TO RELAX**

**Body Awareness** Allows you to become more aware of body sensations, i.e. muscle tension and muscle relaxation

**Controlled breathing** Can be done anywhere, requires less energy to breathe and increases oxygen to lower lung areas. Also known as abdominal or diaphragmatic breathing. See section on breathing control, page 12.

**Distraction** Music - anything with a calming and soothing effect i.e. pan pipes, classical, sounds of dolphins etc. Guided imagery - generally a voice guiding your thoughts to a safe; quiet; calming place which can be anywhere i.e. deserted beach, woodland area, garden

**Activity** Anything you can do that will make you concentrate on something else other than the thoughts that are troubling you i.e. reading, knitting, crosswords, DIY etc.

Remember, it is important you practice relaxation and use it in everyday situations so that you can build up your skills and confidence. Plan to relax before tackling something difficult and avoid advance worrying. If you practice relaxation then you will be able to use it in a difficult situation.

## **BREATHING AND ENERGY CONSERVATION**

Breathing and energy conservation is important to everyone, especially for people with respiratory problems.

A decrease in oxygen intake means fatigue comes more quickly.

Less energy used per task allows you more tasks per day.

Analysing activities and pacing yourself is vital.

**What?** Decide what really needs to be done. Prioritise what you are going to do and allow some jobs to wait. You will get to those jobs when you finish the more important tasks.

**When?** Choose the best time of day to carry out tasks that require lots of energy, i.e. If you normally take a bath or shower in the morning and your breathing is worse at this time, change your bath or shower to the evening. Swap between easy and difficult tasks.

**Why?** Ask why you are doing this job, is it necessary? Is it to please another or to please yourself? Can you spare the energy? Learn to delegate, learn to ask for assistance if you need it. Learn to say no and be comfortable with it.

**Where?** Ask whether the job is being done in the most convenient setting. Organise work areas so that regularly used items are within easy reach to avoid stretching, bending, twisting etc.

**How?** Be sure you are using breathing control and finally break activities down into steps e.g. Get what you need - Do the job - Clear up. Avoid both overdoing and underdoing the amount you do at any one time.

**Pacing** Pacing yourself is an element of energy conservation. Pacing means slowing down and taking your time. Space out the jobs you have to do. Some basic principles of pacing are:

- ◆ Balance a period of rest with a period of activity: a little work, then a little rest.
- ◆ Avoid large meals and doing activities within 1-hour after meals.
- ◆ A moderate steady pace is most productive as this avoids a long recovery time on completion of a task.
- ◆ Rest when tired.
- ◆ Sit when possible as sitting helps reduce fatigue.
- ◆ Avoid extremes, such as heat, cold, wind, distance and length of time.

## **OTHER FACTORS WHICH MAY AFFECT YOUR BREATHING**

- ◆ Air fresheners, perfumes, cleaning products etc can all affect your breathing.
- ◆ Certain environmental factors may also affect your breathing e.g. weather variations, exhaust fumes.
- ◆ Having a chest infection

## **WORK SIMPLIFICATION**

The following tips will help you in using your energy to the fullest when doing everyday activities

1. Use the most efficient tools. For example use electric hand tools.
2. Put on a towelling bathrobe after showering rather than rubbing with a towel.
3. Push or slide objects, rather than lift them.
4. Walk with your vacuum cleaner or brush next to you rather than pushing or pulling it in front of you.
5. Avoid working over shoulder height.

## **ASSISTIVE EQUIPMENT AND ADAPTED TECHNIQUES**

There is a variety of equipment available, which has been designed to help people with everyday activities. This equipment is available from your Occupational Therapist in the Hospital or from the Community Occupational Therapist who is based in your local Social Work Department.

It is now also possible to purchase most of this equipment privately through many high street outlets and rehab shops or companies.

The internet is also a good source of information. If possible shop around as prices may vary.

Equipment varies from small items such as a long shoehorn to larger items such as walk-in showers and stair lifts.

On occasions, equipment may not be necessary. It may be that the techniques discussed in Breathing and Energy Conservation section can help.

Some people may need adaptations to their house to help with everyday activities. For example, rails at the front door or a walk-in shower. The Community Occupational Therapist will need to carry out an assessment of you and your home before any adaptations can be made.

At times, there may be a waiting list for assessment and adaptations - this can vary from area to area. There may be a charge for home adaptations.

## **SELF REFERRAL**

You can refer yourself to your Community Occupational Therapist by telephoning your local Social Work Department.

## **WHEELCHAIRS**

If you feel a wheelchair would give you more freedom and independence out doors you can ask your GP or Physiotherapist to refer you for this.

You can also obtain a wheelchair on short term loan from the British Red Cross Society - see contact details at the end of this booklet.

Wheelchairs are available in most large shopping centres (see section on getting out and about).

## **EATING FOR GOOD HEALTH**

It is important that you eat a healthy, varied diet and maintain a healthy weight in order to keep well and fight infection.

The plate over the page shows the relative amounts of each type of food that make up a healthy diet - as you can see from the size of each section of the plate, you should eat more fruit and vegetables than foods that contain fat or sugar.



A healthy, balanced diet should include a variety of foods from each of the following groups:

- ◆ Fruit and vegetables - aim for 5 servings a day
- ◆ Starchy foods - pasta, bread, rice, cereal and potatoes
- ◆ Protein - meat, fish, poultry and eggs. Beans and pulses are a good alternative to meat
- ◆ Dairy products
- ◆ Small amounts of fatty and sugary foods

Try to limit the amount of fatty or sugary food and drinks such as chips, crisps, nuts, chocolate, cakes, pies, pastries etc. that you eat.

## **MAKING EATING EASIER**

- ◆ Cook when you feel you have more energy. You can reheat meals before you eat them
- ◆ Freeze leftovers. This may save you preparing a meal later in the week.
- ◆ Rest before and after eating.
- ◆ Choose softer foods if chewing makes you breathless.
- ◆ Sit at a table if possible to allow you to rest your arms. Leaning on one arm and eating with the other can be easier.
- ◆ If you use oxygen, use nasal prongs while eating.

There is more information in your 'Living with COPD' booklet under the topic 'Eating and Diet'.



## WHAT HAPPENS IF I GET A LOT WORSE?

Remember, COPD is a chronic condition. This means that you will have it for the rest of your life. This doesn't mean that you will definitely get worse but you might.

For those of you who get worse there are a number of palliative care services available throughout Lanarkshire, some of which are based at St. Andrew's and Kilbryde Hospices. Sometimes people can feel quite anxious regarding palliative care and hospices as they associate them with the end of life. However, the focus of palliative care is on managing symptoms for patients with chronic health problems. People can use palliative care services over a number of years. It is important to remember that palliative care is not just for people who have cancer; but is also available for people with COPD or other chronic conditions.

Both outpatient and inpatient palliative care services are available and might include:

- ◆ Medical management of symptoms or treatment
- ◆ Complementary therapies e.g. massage, relaxation, acupuncture
- ◆ Physiotherapy
- ◆ Occupational Therapy
- ◆ Music Therapy
- ◆ CLAN (Compassionate Lanarkshire)
- ◆ Wellbeing programme
- ◆ MacMillan community nurses

Possible reasons for being referred to palliative care may include worsening or uncontrolled symptoms such as recurring chest infections or worsening, difficult to control breathlessness. Palliative care would provide emotional or psychological support for you and your family. It would also give support with end of life issues and decision-making if that were needed.

If you would like to discuss this further then please speak to one of the Pulmonary Rehabilitation Team or your GP.

## TRAVEL ADVICE

Just because you have COPD doesn't mean that you can't go on holiday. In most cases there is no reason why you can't travel. However if you have a current chest infection you should not travel. If your breathing has been worse than normal then you may need to speak to your doctor to get consent to travel.

However you travel, remember to carry all your medication and an up-to-date prescription with you at all times.

If you are on long-term oxygen you will need to contact your oxygen supplier to make arrangements for your holiday. The arrangements will depend on whether you are holidaying in the UK or abroad.

It is also important to have adequate travel insurance, you must tell your insurance company of any conditions you may have. Certain insurance companies are sympathetic to people with chest problems. Speak to your Pulmonary Rehabilitation Physiotherapist or Nurse for a list or you can get one from:

### **Chest, Heart and Stroke Scotland**

- ◆ 103 Clarkston Road  
Glasgow G44 3BI  
Tel: 0141 633 1666  
Advice Line: 0845 077 6000
- ◆ 65 North Castle Street  
Edinburgh EH2 3LT  
Tel: 0131 225 6963  
[www.chss.org](http://www.chss.org)

### **British Lung Foundation**

- ◆ Suite 110-111, Baltic Chambers,  
50 Wellington Street, Glasgow G2 6HJ  
Tel: 0141 248 0050  
[www.britishlungfoundation.org](http://www.britishlungfoundation.org)

## TRAVEL TIPS

- ♦ If travelling by car, travel outwith peak travel times due to the high levels of air pollution at these times.
- ♦ When travelling by car, take frequent breaks.
- ♦ When choosing a holiday resort, consider the local climate and terrain. For example, is the resort hilly or mainly flat?
- ♦ Specific advice is available for flying, please ask.

## GETTING OUT AND ABOUT

### Wheelchair hire

Use of a wheelchair whether electric or not can help increase your independence and means getting out of the house is less of an effort. If you don't want or feel you need your own wheelchair then you can hire one. Many main shopping centres offer wheelchair and electric buggy hire. Below is a list of the main shopping centres and their numbers.

### Shopmobility

#### **North Lanarkshire Shopmobility**

- ♦ **Coatbridge** - Exchange Place, Coatbridge ML5 3RB

Tel: 01236605795

Opening Hours: Monday to Friday 10am to 4.30pm

Saturday 10am to 4pm

- ♦ **Motherwell** - 89 Merry Street, Motherwell ML1 1JJ

Tel: 01698 303199

Opening hours: Monday to Friday 10am to 4.30pm

Saturday 10am to 4pm

To use either of these services call the number to book the wheelchair. When first using this service you will need to register.

## **South Lanarkshire Shopmobility**

This service offers the hire of motorised scooters and wheelchairs for anyone with a mobility problem. To use the facility you pay a £20 annual charge and £2 per hire

- ♦ **East Kilbride** - Unit 2A Olympia Mall, Town Centre, East Kilbride G74 1PG - Tel: 01355 571300

Opening hours: Monday to Saturday 9am- 5pm

There is disabled parking beside the units in the Olympia Mall and Centre West.

- ♦ **Hamilton** - Duke Street Car Park, Ground floor, Hamilton ML3 7DT  
Tel: 01698 453633

Opening Hours: Monday to Saturday 9am - 5pm

In Hamilton there are 14 car parking spaces for people using the service.

Other shopping areas will be able to tell you about their local availability for help.

## **Supermarkets**

Most large supermarkets have wheelchairs and some even have trolleys adapted for wheelchair use. You can call your local store and arrange for a wheelchair to be available for you when you shop. If you are unable to move the wheelchair ask at customer services, as they may be able to provide a member of staff to help you around the store.

A number of other stores offer a wheelchair service such as Marks and Spencer's, B&Q and Ikea.

Wheelchairs are also available to hire from the British Red Cross.

- ♦ Glenhove Road, Cumbernauld, G67 2LF. Tel: 01236 722300
- ♦ 4 Nasmyth Place, Hillington, Glasgow G52 4PR. Tel: 0141 891 4055

## Education

Your two booklets have most of the information you will need to manage your chest condition. The following topics will be discussed in a group with a member of your rehabilitation team. Please ask a health professional within the class if you have any questions regarding your self-management.

## Topics

- ◆ What is COPD?
- ◆ Breathing Control
- ◆ Exacerbations
- ◆ Medications and inhalers
- ◆ Chest Clearance
- ◆ Benefits of Exercise
- ◆ Inhaler Devices and Techniques
- ◆ Outings and Travel
- ◆ Energy Conservation
- ◆ Health Promotion
- ◆ Managing Breathing

## **SUPPORT GROUPS OR VOLUNTARY ORGANISATIONS**

Self Help Groups are an opportunity to meet with others who have similar respiratory problems to yours.

If interested please contact one of the organisations below to find local groups.

- ◆ British Lung Foundation
- ◆ Chest heart and Stroke Scotland  
(see contact details at the end of this booklet)

## USEFUL CONTACTS

As well as the team you meet directly the following contacts can be of use.

- ♦ **Money Advice Scotland Service**  
0141 572 0237  
[www.moneyadvicescotland.org.uk](http://www.moneyadvicescotland.org.uk)
- ♦ **For Long-term conditions: Benefits Advice**  
**Benefits Enquiry Line (Free) Tel: 0800 882 200**
- ♦ **Financial Inclusion Partnerships for those resident in Glasgow**  
Tel : 0141 287 5901  
Fax : 0141 287 3541  
[www.LTC@fs.glasgow.gov.uk](mailto:www.LTC@fs.glasgow.gov.uk)

### Social Work Services

You may also want to contact your local social work department to request more information i.e. for home helps, Meals on Wheels, Blue Badge Parking and other services.

### Support Groups or Voluntary Organisations

- ♦ **National Osteoporosis Society Tel: 01698 811171**  
PO BOX 10021 Helpline: 0845 450 0230  
Uddingston, Glasgow G71 7W  
[www.nos.org.uk](http://www.nos.org.uk)
- ♦ **Citizens Advice Bureau Tel: 0141 552 5556**  
88 Bell Street, Glasgow G1 1LQ  
[www.cas.org.uk](http://www.cas.org.uk)
- ♦ **British Lung Foundation Tel: 0141 248 0050**  
Suite 103-104, Baltic Chambers, 50 Wellington Street,  
Glasgow G2 6HJ - Helpline: 03000 030 555  
[www.britishlungfoundation.org](http://www.britishlungfoundation.org)

- ♦ **Chest Heart & Stroke Scotland Tel: 0300 121266**  
Glasgow Regional Office  
Suite 2, 24 Stonelaw Road Rutherglen, Glasgow G73 3TW  
Advice line: 0808 801 0899  
[www.chss.org.uk](http://www.chss.org.uk)
- ♦ **Lanarkshire Carers Centre Tel: 01698 428090**  
Unit 1A Princes Gate, 60 Castle Street, Hamilton ML3 6BU  
[www.carers.org](http://www.carers.org)
- ♦ **Quit Your Way - NHS Stop Smoking Service**  
**Tel: 0800 84 84 84**  
[www.QuitYourWay.Scot](http://www.QuitYourWay.Scot)

# CONFIDENTIALITY AND THE USE OF PATIENT INFORMATION

NHS Lanarkshire take care to ensure your personal information is only accessible to authorised people. Our staff have a legal and contractual duty to keep personal health information secure, and confidential. In order to find out more about current data protection legislation and how we process your information, please visit the Data Protection Notice on our website at [www.nhslanarkshire.scot.nhs.uk](http://www.nhslanarkshire.scot.nhs.uk) or ask a member of staff for a copy of our Data Protection Notice.

**NHS Lanarkshire** - for local services and the latest health news visit [www.nhslanarkshire.scot.nhs.uk](http://www.nhslanarkshire.scot.nhs.uk)  
NHS Lanarkshire General  
Enquiry Line: 0300 30 30 243

**NHS inform** - The national health information service for Scotland.  
[www.nhsinform.co.uk](http://www.nhsinform.co.uk)  
Tel No: 0800 22 44 88

If you need this information in another language or format, please e-mail: Translation.  
[Services@lanarkshire.scot.nhs.uk](mailto:Services@lanarkshire.scot.nhs.uk)



[www.careopinion.org.uk](http://www.careopinion.org.uk)

This information booklet was adapted from NHS Greater Glasgow and Clyde leaflet.

Pub. date:	July 2022
Review date:	July 2024
Issue No:	02
Department:	Acute Services
Clinical Lead:	

PIL.PULMRE.20\_09151.L  
22\_11457