Breathlessness

Breathlessness, or shortness of breath, describes discomfort or difficulty with breathing. The medical term for breathlessness is *dyspnea* (pronounced disp-nee-a). People describe the feeling they get when breathless in different ways. They may use the words “short of breath,” “tightness in my chest,” “can’t get enough air,” etc. Breathlessness can be uncomfortable and sometimes scary, but being breathless does not damage your lungs. Talk to your health care providers about your breathlessness so that they can diagnose the cause and help you find treatments that work for you.

**What causes breathlessness?**

Breathlessness can be caused by many things including:
- lung disease
- heart disease
- anemia (low red blood cell count)
- low fitness level (being “out of shape”)

Breathlessness may come on suddenly, without a known reason, or it may happen with activities such as making the bed or picking up heavy objects. Some people with respiratory problems can feel breathless just by doing normal activities like getting out of a chair or walking to another room.

**Can breathlessness be treated?**

Breathlessness can usually be controlled by medication, breathing techniques, exercise, and sometimes supplemental (extra) oxygen. The first step in the control of breathlessness is to find out what is causing the problem. Once your health care provider has evaluated your breathlessness, determined the likely cause and recommended the best treatment strategy, you can become a partner in your own care by following a few simple steps:

- **Step #1 Take your medication as prescribed.** Many lung diseases cannot be controlled without medication. That means you need to take your breathing medication exactly as prescribed by your health care provider. Some medicines need to be taken every day whether you feel like you need it or not. You’ll need to learn how to take your inhalers properly to get the most medication out of each spray. Supplemental oxygen is also a medication and may be useful to help your breathlessness if your oxygen level is low (but it won’t benefit you if your oxygen levels are usually normal). See ATS Patient Information Series pieces on Inhalers, Medicines for COPD and Oxygen Therapy at http://patients.thoracic.org/information-series/index.php for additional information.

- **Step #2 Learn breathing techniques.** There are special breathing techniques that you can use depending on the cause of your breathlessness. For example, if you have COPD, you may be taught pursed-lip breathing when you are breathless. This will help you slow down your breathing to a more comfortable rate and help you take deeper, more satisfying breaths. If you have another type of respiratory condition, this technique may help you as well.

- **Step #3 Build up your stamina (strength).** You may have given up or avoided many activities because of breathlessness. However, if you don’t exercise, your muscles will become weak and be less efficient at using the oxygen that is being sent to the muscles and other areas of your body. This deconditioning or “being out of shape” can result in even worse breathlessness, so it’s important to exercise at a level that is safe for you.

- **Step #4 Pace yourself.** Because you are breathless, you may find yourself rushing to finish activities and chores. Rushing to get activities done can worsen breathlessness. Pace yourself by doing activities in stages. If you feel “strongest” in the mornings, do your heaviest activities such as showering or out-of-home activities (e.g. shopping, visiting etc.) in the mornings. If you get breathless eating, prepare foods that are ground or easy to chew. Holding your breath while you chew food will make your breathlessness worse.

- **Step #5 Try not to hold your breath.** Breath holding can become a habit you do without thinking, particularly when doing activities such as lifting something or even walking. Instead of holding your breath, try breathing out when you are doing the hardest part of any activity, like lifting. Also, try to breathe out two to three times longer than you breathe in, but never force the air out. Let the air “roll” out of your lungs. When you walk, try breathing in while you take one step and breathe out as you take two to three steps. You may be walking slower, but you can walk farther because you are less short of breath.

- **Step #6 Sit in front of a fan.** You may find sitting or standing in front of a fan eases the breathlessness. Position the fan to blow across your face. Use a fan after exerting yourself or at other times when your shortness of breath is not getting better as fast as you would like it to.

- **Step #7 Ask about other medications.** Ask your health care provider if there are medicines, other than your breathing medicines, that can help lessen your breathlessness. Sometimes a medicine used to treat anxiety or reduce pain can be helpful to decrease shortness of breath. People with advanced...
l lung or heart disease who continue to have severe breathlessness, despite being treated optimally with standard medications, may be offered low doses of morphine. This drug can be very helpful in some people (but not everyone) who have difficulty controlling their breathlessness with steps 1-5.

How should I exercise?
Exercise seems like the last thing you would think of that might help your breathlessness! You can in fact worsen your breathing if you do not stay active. You can learn how to exercise safely either in an organized pulmonary rehabilitation program or a self-directed walking program. If you participate in a self-directed walking program, you should follow these steps once your health care provider gives you the go-ahead:

- walk for a total of 10 minutes (taking as many rest stops as you need) 5 days a week.
- In two weeks, you should notice you are taking fewer stops in those 10 minutes.
- Then, increase the time you walk to a total of 15 minutes, with a goal of 30 minutes of exercise 5 days a week. This may take several months to achieve.

Your health care provider may refer you to a pulmonary rehabilitation program in your area. These programs include a combination of supervised, monitored exercise and educational sessions, specially designed for people with lung disease. They are run by trained health care personnel who understand how breathless you may get and that it is very difficult for you to get around. The staff will help you gradually build muscle strength and stamina over a period of several weeks. They will not only work with you to increase the strength in your arms and legs, but they will help you achieve your goals for walking, climbing stairs and doing day to day activities. They also discuss how to get the most benefit out of your inhalers, teach you energy conserving techniques and how to pace yourself, and work with you to learn how to cope with the stress of having a lung condition, including what to do if your breathlessness gets worse.

What is an Action Plan?
Sometimes people with breathing problems can develop an episode of sudden breathlessness (called “breathing event”). Your health care provider will work with you to develop a series of steps you can take, known as an Action Plan, to guide you through an episode of breathlessness. Your Action Plan will instruct you when to use pursed lip breathing or your rescue inhaler (albuterol), and what questions to ask yourself about your condition, for example, whether you’re bringing up more or discolored phlegm (mucus) than normal, whether you’ve stopped raising phlegm suddenly, or whether you’re running a fever. The Action Plan will also instruct you when to call your health care provider and when to go to the hospital emergency room.

What should I tell my health care provider about my breathlessness?
Giving your health care provider details about your breathlessness is important for them to understand what may be happening to you and how it is affecting your life. Tell your health care provider: when the breathlessness started (for example, suddenly 2 days ago); what (if anything) makes your breathlessness better (for example, using your albuterol) or worse (for example, showering or walking across the bedroom); and for those who usually bring up phlegm/mucus, how the amount of phlegm/mucus has changed (are you bringing up more or less than usual; has the color or thickness changed) since your breathlessness has increased.

What should I do if my breathlessness changes?
Contact your health care provider if you:
- suddenly develop severe breathlessness that will not go away
- develop chest pain or pressure with your breathlessness
- do not feel relief after using your inhalers
- have a fever or a change in the amount, color, or thickness of sputum
- find the feeling of breathlessness does not go away after resting for 30 minutes

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Resources:
National Institutes of Health (NIH)
Mayo Clinic
MY00119
National Health Service
http://www.nhs.uk/conditions/shortness-of-breath/Pages/
Introduction.aspx

Action Steps

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Doctor’s Office Telephone: