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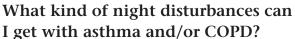
Patient Information Series

Sleep Mini Series #5

Sleep Problems in Asthma and COPD

Good quality sleep is important for everyone. People with asthma and/or Chronic Obstructive Pulmonary Disease (COPD) may have sleep issues that can lead to nighttime awakenings and daytime sleepiness.

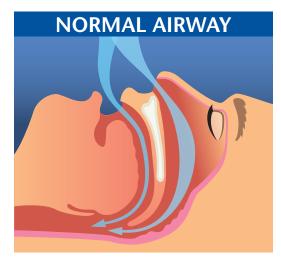
This may worsen their symptoms of asthma or COPD. There are a number of steps people with asthma and/or COPD can take to improve their sleep.

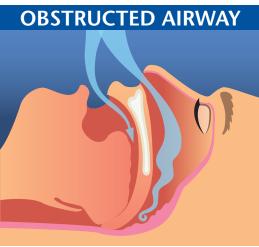


Waking up at night, also called nighttime arousals or nighttime awakenings, can happen if you have asthma or COPD. These arousals interrupt your sleep and may result in feeling groggy in the morning and/or tired during the day. Symptoms of COPD and asthma that may cause you to wake up at night include coughing, wheezing, chest tightness and breathlessness. People with COPD and/ or asthma may also be at increased risk for sleep apnea and may awaken from symptoms of this sleep problem.

What is sleep apnea and why can I get sleep apnea with asthma and/or COPD?

Sleep apnea is a condition that causes you to have periods when you stop breathing during sleep. These pauses in breathing usually last 10 seconds or longer. It is not clear why sleep apnea may occur more often in people with asthma and/or





COPD, but you are more at risk if you have severe asthma, are overweight, have nasal congestion, acid reflux and/or use high doses of inhaled corticosteroids. (Also see ATS Patient Series on Obstructive Sleep Apnea in Adults at http://patients.thoracic.org/information-series/index.php).

How do sleep problems affect my asthma and/or COPD?

People with asthma and/or COPD who have a frequent problem waking up at night often have worse respiratory disease. They are also at risk for complications from their asthma or COPD. Sleep apnea can worsen asthma symptoms throughout the



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day, increase your need for rescue inhalers, and worsen your quality of life. If you have COPD, the pauses in your breathing and low oxygen levels with sleep apnea can make your COPD worse, increase your risk for exacerbations and reduce your survival. Sleep apnea can be a serious condition by itself. In those with moderate to severe sleep apnea who do not get treatment, their risk for hypertension, heart disease and stroke is increased (see ATS Patient Series on Heart disease and sleep apnea).

What can I do to help myself sleep better?

The first step is to make sure that your asthma and/or COPD is under good control. You may have to visit with your health care provider to be evaluated, see that you are getting the right medical treatment and develop a series of steps you can take, to control your asthma/ COPD and guide you through an episode of sudden breathlessness. Your provider will instruct you when to use your rescue inhaler (albuterol) or pursed lip breathing, and what questions to ask yourself about your condition, should you experience any sudden breathlessness. Also, talk to your health care provider if you have nasal congestion or get heartburn, to get them under better control. If you smoke, quitting smoking will not only help your asthma or COPD control, but the quality of your sleep will also improve. Tell your health care provider if you think you may have sleep apnea so that you can be evaluated. Sleep apnea is a treatable condition!

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References:

American Thoracic Society (ATS) ATS Patient Series on COPD at

http://patients.thoracic.org/information-series/index.php

Sleep Foundation

http://www.sleepfoundation.org/article/sleep-related-problems/chronic-obstructive-pulmonary-disease-and-sleep

R Action Steps

If you have asthma and/ or COPD, you may be at increased risk for sleep apnea if:

- You have more frequent asthma/ COPD symptoms, you are overweight, smoke, experience nasal problems, heartburn, or use higher doses of inhaled corticosteroid
- ✓ You are sleepy during the day, even after you have slept all night
- ✓ You snore or make choking noises while you sleep
- ✓ You have been observed to have breathing pauses during sleep
- ✓ You wake up in the morning with headaches

Doctor's Office Telephone:



The ATS Patient Information Series is a public service of the American Thoracic Society and its journal, the AJRCCM. The information appearing in this series is for educational purposes only and should not be used as a substitute for the medical advice one one's personal health care provider. For further information about this series, contact J.Corn at jcorn@thoracic.org.