

# Pat Owens

## Chronic Obstructive Pulmonary Disease (COPD)



I am 78 years old and have very severe COPD. I have had asthma since I was six years old. They wouldn't let me run and play or do sports, for fear I would have an asthma attack, so growing up I would sit and watch my friends and siblings play.

I was diagnosed with Chronic Bronchial Asthma in 1998. I was put on disability and had to quit working. I smoked for 42 years and with the help from my Lord I quit (cold turkey) after having a bout with pneumonia. I was put on oxygen in 2002. In 2007, I was diagnosed with exercised induced asthma and emphysema (the doctors say I have "three whammies"). In 2016, I had pneumonia. I was put on a ventilator for four days and spent two weeks in the hospital. After coming home, with exercise, diet, and breathing exercises I went off oxygen for two years. I now only use it with exertion and when I have flare ups.

I live by myself so it is very important to take care of myself so I can continue to stay as independent as possible. When I go for a walk, I use my umbrella stroller, like the ones they use for children. I put my oxygen M9 tank and my purse in it, because the M9 tanks weigh 10lbs alone. When I take my groceries into my house, again I use my stroller. I also stock up on my groceries for when I might be sick and can't go to the store. It takes a while to clean my little house, but I get it done, though not all at once.

It's very important to have family and friends to be able to depend on, and I also have several hobbies to focus on when I get sick. I do love my Bible study and do it just about every day. I also have six wonderful children, along with their awesome spouses, 28 grandchildren, and 10 great grandchildren. None of them live close to me. They all live in either cold states (my lungs don't like the cold) or in higher elevations (my lungs don't like that, either). They come to visit me, and I talk to at least one every day. If I need them, I just call, and they are here. I also have some wonderful friends that help me any time I need it. My Lord has blessed me so much as to giving me the tools and knowledge of how, what, and where to go to get through flare ups and everything else in my life.

I wish medical personnel would explain more to their patients about the ways they can help themselves. Some people give up when they get a diagnosis, and don't do anything for themselves because it's hard to breathe. They are not told that exercise gets easier as they continue with it. I have gotten most all of my knowledge of this dreaded disease through my own research and the COPD Foundation, and I am one of the Arizona State Captains for the COPD Foundation.

It is very important to keep busy and do what you can. I exercise in my home when I can't go out because of the weather or if I have a flare up. I have joined the gym for the use of more equipment. I keep busy as I can, I volunteer in the community I live in to help people with whatever I can do for them. I also do whatever I can to give people knowledge of COPD. I can't fly anymore because the pressure in the cabins on the airplanes is set at about 8000 ft elevation and I can't do high altitudes even with oxygen, so when I travel, I put my O2 in my car and away I go. I haven't traveled since COVID-19 began but hope to again when things calm down. I feel at my age I deserve to do whatever I can and want to do!

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## Chronic Obstructive Pulmonary Disease (COPD)

Chronic Obstructive Pulmonary Disease (COPD) is a preventable and treatable lung disease. People with COPD must work harder to breathe, which can lead to shortness of breath and/or feeling tired. Some other facts about COPD are:

- Although the most common cause of COPD is tobacco smoke, there are several other factors that can cause or make COPD worse, including environmental exposures and genetic (inherited) risk.
- Common symptoms of COPD include feeling short of breath while resting or when doing physical activity, cough, wheezing, fatigue, and/or mucus production that does not go away.
- Some general classes of medications to treat COPD include those that aim to widen the airways (bronchodilators), reduce swelling in the airways (antiinflammatory drugs, such as steroids), and/or treat infections (antibiotics).



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