REMEMBER

If you have trouble breathing or a cough that lasts more than a month, see your doctor right away. The sooner you get treated the better your chance for successful treatment and management of COPD.
Overview

To understand COPD, it helps to understand how the lungs work. The air that you breathe goes down your windpipe into tubes in your lungs called bronchial tubes, or airways.

The airways are shaped like an upside-down tree with many branches. At the end of the branches are tiny air sacs called alveoli (al-VEE-uhl-eye).

The airways and air sacs are elastic. When you breathe in, each air sac fills up with air like a small balloon. When you breathe out, the air sac deflates and the air goes out.

In COPD, less air flows in and out of the airways because of one or more of the following:

- The walls of the airways become thick and inflamed (swollen).
- The airways make more mucus than usual, clogging up the airways, which makes you cough.
- The air sacs cannot empty and your lungs feel very full.

What is COPD?

COPD is a progressive disease that makes it hard to breathe. “Progressive” means the disease gets worse over time.

COPD can cause coughing that produces large amounts of mucus (a slimy substance), wheezing, shortness of breath, chest tightness, and other symptoms. Adults who may have COPD will have trouble breathing or a cough that will not go away.

Cigarette smoking is the leading cause of COPD. Most people who have COPD smoke or used to smoke. Long-term exposure to other lung irritants, such as air pollution, chemical fumes, or dust, also may contribute to COPD.

You cannot get COPD from someone else. Adults get COPD, not children. Most people with COPD are at least 40 years old; but there are some people under 40 who have the disease. See a doctor as soon as you have trouble breathing or have a cough that lasts more than a month.

In the United States, the term “COPD” involves one or both of two main conditions—emphysema (em-fi-SE-ma) and chronic obstructive bronchitis (bron-KI-tis).

In emphysema, the walls between many of the air sacs are damaged, causing them to lose their shape and become floppy. This damage also can destroy the walls of the air sacs, leading to fewer and larger air sacs instead of many tiny ones.

In chronic obstructive bronchitis, the lining of the airways is constantly irritated and inflamed. This causes the lining to thicken. Lots of thick mucus forms in the airways, making it hard to breathe and get the oxygen you need.

COPD develops slowly and often worsens over time. Severe COPD may prevent you from doing even basic activities like walking, cooking, or taking care of yourself.

COPD has no cure yet, and doctors don’t know how to reverse the damage to the airways and lungs. However, treatments and lifestyle changes can help improve your symptoms and help you to breathe better.