

A Short Note on Chronic Obstructive Pulmonary Disease

Zakwani Rajiah*

Department of Medicine, Cyril and Methodius University, Skopje, Bulgaria

Correspondence:

Zakwani Rajiah, Department of Medicine,
Cyril and Methodius University, Skopje,
Bulgaria, E-mail: Zakwani@st.cyril.bg

DESCRIPTION

Chronic Obstructive Pulmonary Disease (COPD) refers to a group of lung disorders that make breathing difficult and worsen over time. Breathing difficulties, coughing, mucus (sputum) production, and wheezing are some of the symptoms in COPD. The most prevalent cause is long-term exposure to irritating gases or particulate matter, most often cigarette smoke. Heart disease, lung cancer, and a variety of other ailments are more common among COPD patients.

Emphysema and chronic bronchitis are the two most common conditions that cause COPD. These two issues are commonly present at the same time in COPD patients, and their severity varies. The bronchial tubes, which transfer air to and from the lungs air sacs, become infected in chronic bronchitis (alveoli). It is characterised by a daily cough and the production of mucus (sputum).

Emphysema is a lung disease in which the alveoli are damaged by harmful exposure to cigarette smoke and other irritating chemicals and particulates. COPD is curable, despite the fact that it is a progressive condition that worsens with time. Tobacco smoking is the leading cause of COPD in developed countries.

Although many smokers with extended smoking histories may acquire impaired lung function, only a small percentage of chronic smokers develop clinical manifestation COPD. Some users have lung diseases that are less prevalent. Until a more complete examination is undertaken, they may be diagnosed as having COPD. COPD has no known cure. Treatments, on the other hand, can assist reduce symptoms, reduce disease progression, and increase capacity to keep active. There are various medicines available to prevent or treat the disease's consequences.

Complications

People with COPD are more susceptible to colds, flu, and pneumonia. Any respiratory infection can make it harder to breathe and cause significant lung tissue damage. COPD can raise your risk of cardiac disease, including heart attack, for reasons that aren't entirely known. High blood pressure in the arteries that provide blood to your lungs may be a symptom of COPD (pulmonary hypertension).

Prevention

The most crucial aspect in COPD treatment is lifestyle changes, such as quitting smoking. Avoiding sharing smoke and other situations when irritants to the lungs are prevalent. By strengthening the muscles that help you breathe, physical activity can improve your overall health. This helps to free up the airways and make breathing easier.

Treatment

The bulk of bronchodilators are delivered via inhalers. Anti-inflammatory medicines may be used in the inhaler in more severe cases. Vaccines against the flu and pneumococcal pneumonia, because persons with COPD are more likely to develop significant complications from these illnesses. Pulmonary rehabilitation is a programme that helps patients with persistent respiratory issues improves their quality of life. It might include things like disease management training, nutrition counselling, and psychological therapy.

Surgery, which is normally reserved for those who have severe symptoms that have not improved with medication. There are operations to remove damaged lung tissue and huge air gaps (bullae) that can occur when air sacs are removed for COPD that is mostly associated to emphysema. The bullae might make it difficult to breathe. Some persons with severe COPD may require a lung transplant.

This is an open access article distributed under the terms of the Creative Commons Attribution Noncommercial Share Alike 3.0 License, which allows others to remix, tweak, and build upon the work non commercially, as long as the author is credited and the new creations are licensed under the identical terms.

For reprints contact: Pharmacy@jbclinpharm.org

Cite this article as: Rajiah Z. A Short Note on Chronic Obstructive Pulmonary Disease. J Basic Clin Pharma. 2021;12:120.