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A persistent winter cough spells time for action

Winter is a difficult time for many of us – even those in good health can feel a little depressed and isolated when it's grey and gloomy outside. But for those who have a chronic lung condition like Chronic Obstructive Pulmonary Disease (COPD), winter can be a particularly challenging as lifestyle limitations become even more apparent.

COPD is a long term disease of the lungs which causes shortness of breath. COPD is a group of disorders that includes emphysema and chronic bronchitis and it affects up to one in six Australians* aged 45 or over.¹

Even more worrying, as many as three in four Australians with COPD are unaware they even have the disease,² and therefore they are not taking important steps to manage the condition. Many of these people mistake their symptoms as signs of ageing or a lack of fitness. In winter, a nagging winter cough may be seen as a typical winter ailment when in fact it may be a symptom of COPD.

“Coughs and colds are common during winter, even for people who are usually fit and healthy,” said Associate Professor Christine McDonald, Repatriation Physician, Department of Respiratory Medicine, Austin Hospital, Melbourne.

“However, if you have a nagging winter cough that just won't go away – this is not normal. If you are experiencing shortness of breath compared to others your age, a repetitive cough with phlegm and/or have a history of cigarette smoking, it is very important to see your GP for a simple lung function test to ensure you are accurately diagnosed,” explained Associate Professor McDonald.

“Winter is also often the time when people who have COPD experience severe attacks which lead to hospitalisation. It is particularly important for those with COPD to take extra precautions in winter such as ensuring they are vaccinated against influenza and pneumococcal disease,” Associate Professor McDonald added.

Fortunately, while damage done to the lungs as a result of COPD is not reversible,³ steps can be taken to stem the progress of the disease and improve both physical and emotional quality of life.

“The first step is obviously to recognise the symptoms and visit your GP for a lung function test,” said Associate Professor McDonald. “Once you have been accurately diagnosed your doctor will assist you with medication (if appropriate) and advise you on recommended lifestyle changes such as giving up smoking. Your doctor can also refer you to various support programs such as pulmonary rehabilitation.”

Pulmonary rehabilitation is an exercise program specifically designed for people with respiratory conditions. The classes aim to improve shortness of breath, ease both anxiety and depression, reduce fatigue, make exercise easier and improve overall quality of life – this helps people to feel more in control of the disease and their own lives. This can mean that people can return to doing things that they love but may have given up due to breathlessness, such as gardening and playing with grandchildren.

Addressing the emotional impact of a chronic condition such as COPD can be just as important as the physical. The Australian Lung Foundation offers LungNet – a national network of patient support groups for people with COPD and other lung conditions. LungNet groups provide an opportunity for people with COPD to meet others with the condition, to learn more about it and to get involved with local LungNet activities.

Yvonne Bedson was diagnosed with COPD in 1996 when she was 55 years old. When she was first diagnosed she was very ill and unable to walk from room to room in her own house without feeling breathless.

“I felt very scared and as though I had lost control of my life,” said Yvonne. “However at the same time it was a relief to have a name and explanation for why I couldn’t do things any more – and to learn what I could do to help me breathe easier.”

Since diagnosis, Yvonne has taken control of her life and her condition. She quit smoking, joined a local program that teaches skills to maximise breathing and she exercises regularly – walking up to 3 kilometres a day in stages.

She also runs a newsletter and local patient support group which is supported by The Australian Lung Foundation. “It makes me feel really positive because I am able to give something back to the community and help others with COPD,” said Yvonne.

The Australian Lung Foundation recommends people with COPD take the following steps to protect themselves during the risky winter months:

- Wash hands regularly
- Keep hands away from the nose and mouth
- Get vaccinated against influenza and pneumococcal disease
- Keep in touch with family and friends
- Make use of services available such as support groups and pulmonary rehabilitation

People with COPD and their carers can contact The Australian Lung Foundation to find local support groups, to start their own support group, and to get information to help them understand and best manage their condition. For further information, help and support please call for free on 1800 654 301 or visit www.lungnet.com.au

* Research undertaken in three inner south-eastern Melbourne electorates among 1,224 adults aged between 45 and 69 (95% CI, 15.3% - 21.6%).¹

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