

Kōwhai Programme

Support for whānau & carers

Breathlessness

Shortness of Breath is not harmful, but can feel very unpleasant or frightening. Some people feel breathless all the time while others only feel breathless when being active.

Feeling breathless is a normal experience for anyone when they are more active than usual but usually improves quickly. For those whose lungs are damaged they may need some help to get control of their breathing again.

It can be a common and worrying symptom for people with some illnesses such as lung cancer, chronic obstructive pulmonary disease (COPD), chronic heart failure (CHF) and motor neurone disease (MND).

Some things that can make breathlessness feel worse are: hot, muggy rooms or days; high pollen days; poor sleep; infection.

Treating breathlessness may not be about 'fixing' it but about managing it so the experience of it is less frightening or troublesome.

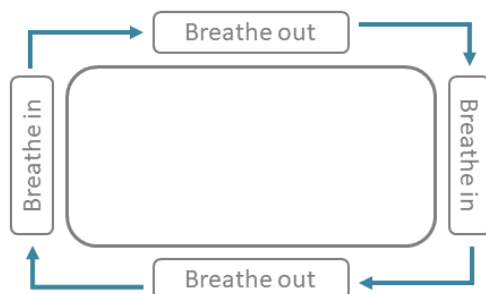
How breathing usually happens

It is important to understand how your muscles work to help you breathe: The diaphragm is a large flat sheet of muscle that sits between your chest and abdomen. As you breathe in, it moves down to help draw the air into your lungs. When you breathe out it relaxes moving upwards. It does not tire easily and therefore can move up and down all day, every day without getting tired.

The breathing accessory muscles: There are many muscles around your neck and shoulders with the role of moving your neck and arms. When you are breathless you might find you lift your shoulders to help you draw air in. But these muscles are not meant to be used for long like this and quickly get tired and sore.

Taking Control

The key to regaining control of your breath is by slowing the breath out. One way of achieving this is by relaxing the shoulders down and trying to breathe from your stomach. As you do, follow the sides of the rectangle with your eyes. As you move your eyes slowly along the long edge of the rectangle breathe out as though you are blowing out a candle. Empty your lungs as much as possible.



Any feelings of breathlessness or distress may not fully go away after using this only once so you may need to repeat it several times.

You can't really do something new when you are breathless so practice this four to six times a day until it becomes familiar and easier to do.

Acupressure

Some people who are breathless find touch helpful. Try putting one hand on the middle of their back and firmly stroking your other hand down one of their arms, all the way to the end of the thumb.



Relaxation practices

These are different from doing a relaxing activity or resting. They require us to use our minds to assist our bodies to achieve a comfortable state. Focus on things that bring you pleasure or calmness. The most effective techniques to help are progressive muscle relaxation and guided visualisation.

Not everyone finds these exercises comfortable to do and some prefer to listen to music or television to provide distraction from the anxiety of being breathless. There are 2 episodes of the Ending Life Well Podcast below that are helpful for this.

Positive self talk

This is very helpful to reverse the unhelpful physical and emotional reactions to being short of breath. When you are aware that you are getting to a breathlessness reaction cycle, it can be useful to tell yourself reassuring words to reverse this response e.g.

'this will pass'

'slow down....'

'be calm'

'I can slow my breathing'.

The Otago Community Hospice has counsellors available to assist you with feeling more confident about dealing with breathlessness.

Fans

Using a fan or even an open window can help ease the feeling of not having enough air to breathe. Having a breeze moving over your cheeks helps you feel that you are getting more air to breathe.

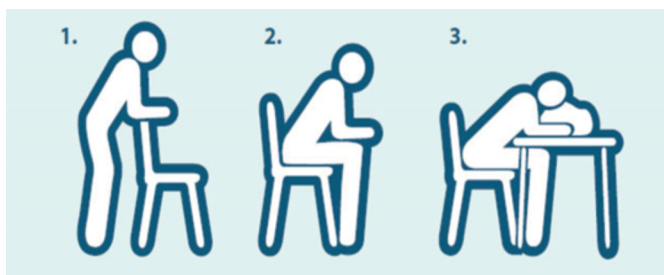
Fans can be a small hand held, a bigger one that sits on the floor or table, or you might find one that sits around your neck.

Positioning

The following positions maybe helpful to manage your breathlessness.

Leaning forward and using your slowed breathing strategy is helpful – you can even do this leaning on the shopping trolley at the supermarket.

For sleep, having your head elevated with pillows and your legs apart can be helpful.



Medicines that might help

There are four main types of medications that are used to help manage breathlessness. These are:

- **Bronchodilators** (such as salbutamol or ventolin). These can open airways and decrease shortness of breath
- **Steroids** (such as prednisolone or dexamethasone). These help reduce swelling in the lungs that cause shortness of breath. Usually only used short term.
- **Benzodiazepines** (such as midazolam). These can help break any cycle of distress that can lead to more breathing difficulties.
- **Opioids** (such as morphine). These can make your breathing easier.
- **The use of oxygen** can help some people, but not everyone – your doctor will suggest this for you if they think it will help your situation.

Managing Your Everyday Activity

Plan your day carefully: What is essential? What can you do and what can be left for others to help with?

Think about what you really want to do in a day so you can balance your day to manage the fatigue related to breathlessness.

Pace yourself: Most people find they have more or less energy at different times. When is the best time to do what? Allow yourself time to do things. Try not to do too much in one day and try to work for short periods of time – alternate heavy and light work.

Do things the easiest way possible: Avoid unnecessary bending, reaching, walking or climbing. Set up your home to make life easier e.g. shower stool, perching stool in your kitchen for when you are preparing meals.

Bending over at the waist can make breathing very difficult and can cause breathlessness so keep your back straight and bend at the knees. Having a long handled reacher can be helpful to limit the need to bend or getting assistance from someone for drying/dressing your lower body.

Try to keep your home at a constant comfortable temperature. Warm your bedroom/bathroom before undressing. Extremes of hot or cold air can aggravate your feeling of breathlessness, so too can steam.

Keep Moving

Regular activity is important to maintain fitness and strength but should be done in balance with rest.

“Blow As You Go” – Breathe in before making any effort, breathe out while making the effort. Avoid holding your breath while moving, such as climbing stairs or bending.

Pace your breathing (for example, take a breath in and out on each step when climbing the stairs). It is important for you to remain as active as your illness allows you to be.

Avoid rushing. People sometimes rush to do an activity as they wrongly think that if they move quicker they will be less breathless when they get there.

Eating

Shortness of breath can make eating hard work. If you use all your energy preparing food, you may have no energy left to eat it. Here are some suggestions to help:

- Eat 5-6 small meals instead of 3 big meals a day.
- Plan to eat before you are too tired or hungry.
- Breathe evenly while you are chewing and eating.
- Stop eating if you need to catch your breath.
- When cooking/baking – try cooking three times the amount so you can freeze meals/foods down for times you don't feel like cooking/baking.
- Used prepared foods such as frozen meals/take away foods/meals on wheels to make things easier for you.
- Use a stool or sit at the table to prepare food (such as when peeling or chopping food).

Coughing and Breathlessness

Sometimes an episode of breathlessness can trigger coughing, or coughing brings on breathlessness. Some people will have medication to assist them with managing this symptom.

Try sipping warm water slowly as this can relieve the symptom sometimes and can make your mouth feel fresher.

Sometimes the coughing is related to your lungs trying to clear fluid. If you are finding it hard to cough, or exhausting from ineffective coughing, try these steps:

- Breathe in through your nose as much as you can comfortably.
- Take an extra sniff, holding that breath.
- Now cough.

A chest infection can cause increased breathlessness and coughing. Be sure to check out the cause of the cough or phlegm especially if it is not usual for you. If you usually have phlegm and it changes in colour or quantity, discuss this with your GP as soon as possible.

Equipment

You may find it helps to have an Occupational Therapist (OT) and Physiotherapist assessment to help you remain as independent as possible. OTs can provide equipment to help with your everyday activities such as a shower stool, raised toilet seat and electric lazy boy chair and Physiotherapists can supply mobility aids such as a walking frame.

Action Plan

With your health professional make a plan that works best for you.

A helpful tool for you and your family/whānau is to create your own personal action plan that has tools that you and the people supporting you find helpful in overcoming your episodes of breathlessness:

- Comfortable positions that help me breathe.
- Strategies that help me breath slowly and gently.
- How I relax my shoulders and upper chest.
- Relaxation steps or positive self talk that works for me.
- Medications that help: (this needs to have input from you GP/specialist on when/how much to take/what to take).

If you would like assistance to develop an action plan, talk with your community care coordinator

ENDING LIFE WELL

A podcast series for carers

<https://otagohospice.co.nz/patient-services/kowhai-programme/carers-podcast/>

Above is a link to 'Ending Life Well' podcast for more support on regaining control of breathlessness. Episode 11 may be particularly useful. Episodes 16 and 17 also offer guided relaxations which can also help with regaining control.

