Chronic obstructive pulmonary disease — called COPD for short — is a term used to refer to a group of chronic lung diseases related to poor airflow to and from the lungs. Most commonly, people with COPD have either emphysema or bronchitis, but asthma may be included as well.

People with COPD have a higher than average risk of developing lung infections, such as pneumonia, which then puts them at higher risk for developing sepsis.

Sometimes incorrectly called blood poisoning, sepsis is the body’s often deadly response to infection. Sepsis kills and disables millions and requires early suspicion and treatment for survival.

Sepsis and septic shock can result from an infection anywhere in the body, such as pneumonia, influenza, and urinary tract infections. Worldwide, one-third of people who develop sepsis die. Many who do survive are left with life-changing effects, such as post-traumatic stress disorder (PTSD), chronic pain and fatigue, organ dysfunction (organs don’t work properly) and/or amputations.

WHAT IS COPD?

COPD is a chronic and progressive illness that cannot be cured. It is an inflammatory lung disease. If you have COPD, damage to your airways, swelling (inflammation) or an excess of mucus make it difficult for air to pass to and from your lungs. According to the National Institutes of Health, “COPD is a major cause of disability, and it’s the third leading cause of death in the United States. Currently, millions of people are diagnosed with COPD. Many more people may have the disease and not even know it.” The CDC says: “Chronic lower respiratory disease, primarily COPD, was the third leading cause of death in the United States in 2011. Fifteen million Americans report that they have been diagnosed with COPD. More than 50% of adults with low pulmonary function were not aware that they had COPD; therefore the actual number may be higher.”

In North America, a major cause of COPD is tobacco smoke, followed by air pollution. Frequent infections and family history may also play a role.

INDIVIDUALS AT HIGHER RISK

Aside from smoking being the major risk factor for developing COPD, those at higher risk are/have:

- Aged 65–74 years
- Women
- Non-Hispanic whites
- Unemployed, retired, or unable to work
- Less than a high school education
- Lower incomes
- Divorced, widowed, or separated
- Current or former smokers
- A history of asthma
INFECTION

Having COPD puts me at much higher risk for developing an infection. What is the difference between infection and sepsis?

An INFECTION occurs when germs enter a person’s body and multiply, causing illness, organ and tissue damage, or disease. For people with COPD, an infection can turn serious, or even deadly, very fast. To prevent infection, wash your hands frequently, and speak to your doctor about receiving vaccinations, including pneumonia and the annual flu shot.

SEPSIS is the body’s overwhelming and life-threatening response to infection, which can lead to tissue damage, organ failure, and death. For a person with COPD, any infection that is anywhere in your body can lead to sepsis.

What are the signs and symptoms of sepsis?

Sepsis is a toxic response to an infection. There is no single sign or symptom of sepsis. It is, rather, a combination of symptoms. Symptoms can include ANY of the following:

- S – Shivering, fever, or very cold
- E – Extreme pain or general discomfort (“worst ever”)
- P – Pale or discolored skin
- S – Sleepy, difficult to rouse, confused
- I – “I feel like I might die”
- S – Short of breath

What should I do if I think a loved one or I have sepsis?

Sepsis is a medical emergency. If you suspect sepsis, call 9-1-1 or go to a hospital and tell your medical professional, “I AM CONCERNED ABOUT SEPSIS.”

SYMPTOMS

Because COPD involves obstructed airflow, the symptoms are related to breathing. They include:

- Difficulty breathing
- Shortness of breath
- Cough
- Sputum (phlegm) production
- Wheezing

COPD may be a respiratory illness, but it can have a big effect on other parts of your life. People with severe COPD may have trouble eating a healthy diet, because shortness of breath can make it difficult to prepare meals and to eat the food that has been prepared. If you are not well nourished, you may be more susceptible to getting an infection.

Shortness of breath may also reduce how much physical exercise you get, and moving around is a big part of staying healthy overall. As well, being short of breath or coughing a lot can make sleeping very difficult, resulting in fatigue, which leads to other difficulties.

TREATMENT

There is no cure for COPD but there is treatment to help manage symptoms, reduce the number of exacerbations (periods of worsening illness), and to slow the disease progress. Recommendations may include:

- Stop smoking
- Avoid air pollution
- Take medications, such as bronchodilators or inhaled corticosteroids
- Oral medications may be needed, especially if you’re having a crisis and need emergency treatment
- Do deep breathing exercises
- Increase your physical activity and eat a healthy diet
- Get your flu and pneumonia vaccines to reduce the risk of developing respiratory infections
- Breathing supplemental oxygen (oxygen delivered by tank)