Breathlessness

What to do if you are concerned about getting out of breath

About this information

Everyone feels out of breath at some time. This information is for people who are breathless and want to find out more. It explains the possible causes of breathlessness and focuses on daily long-term, or chronic, breathlessness.

It also explains how your doctor will diagnose what is causing you to get out of breath and things you can do to help yourself.

What is breathlessness?

Everyone feels out of breath at some time. You might get out of breath after heavy physical activity or exertion such as walking briskly up a steep hill or cycling fast. This is the sort of breathlessness you might expect and you can control.

This information is about being breathless when you find it unexpectedly difficult or uncomfortable to breathe – breathlessness that you don’t feel you can control.

Whether it comes out of the blue or is there every day, it can be very frightening. Anyone who gets out of breath without meaning to will feel anxious. Some people can feel embarrassed. As a result, they might change their behaviour and reduce their levels of activity. That actually makes the problem worse. Sometimes people don’t tell their doctor or nurse about feeling out of breath because they feel responsible and don’t realise help is available.

If you are breathless doing everyday activities, taking longer to do things or even avoiding doing things because you get out of breath, it’s time to go to see your doctor.

The good news is that as well as treating the underlying causes of breathlessness, there are various ways you and your health care professionals can help you to take charge of it so you can get the most out of life.
Health care professionals sometimes refer to breathlessness as dyspnoea.

Acute, or short-term, breathlessness can come on suddenly. It usually requires immediate testing or treatment. In some cases, when there is a flare-up of an underlying condition such as asthma, chronic obstructive pulmonary disease (COPD) or heart failure, this can include starting treatment yourself following an action plan agreed with your doctor or nurse.

This information is mainly about the daily long-term breathlessness that health professionals call chronic. It often develops gradually and lasts for weeks, months or years.

What causes breathlessness?

Feeling out of breath is a symptom. There are many underlying causes of breathlessness and not all of them are due to problems in your lungs.

What causes acute breathlessness?

If your breathlessness is acute – it comes on suddenly or it is short-term or comes and goes – you should act quickly. You will recover better the sooner you get treatment.

The more common causes of this sort of breathlessness are:

- a flare-up of asthma. You might feel your chest is tight or feel you are wheezing rather than being short of breath.
- a flare-up of COPD. You might feel more out of breath and tired than normal and your usual ways to control your breathlessness don’t work so well.
- a pulmonary embolism. This is when you have clots in your lung arteries that have travelled from other parts of your body, usually your legs or arms. These clots can be very small and cause acute breathlessness. More clots can get released over a long time and cause your feeling of breathlessness to get worse, and eventually you might have daily long-term breathlessness.
- lung infections such as pneumonia and bronchitis.
- pneumothorax also called collapsed lung.
- pulmonary oedema or effusion or fluid in your lungs. This might be due to the failure of your heart to pump fluid around efficiently or due to liver disease, cancer or infection. It can also cause long-term breathlessness but this can be reversed once the cause is known.
- a heart attack also called a coronary artery thrombosis.
- cardiac arrhythmia. This is an abnormal heart rhythm. You might feel your heart misses beats or you might experience palpitations.
- hyperventilation or a panic attack
What causes daily long-term breathlessness?

The conditions that cause long-term breathlessness can often be treated, although some cannot be fully reversed. With the appropriate support, you can learn to control your breathlessness, allowing you to live your life better. Conditions that cause long-term breathlessness include:

- chronic obstructive pulmonary disease (COPD).
- heart failure. This can be due to problems with the rhythm, valves or cardiac muscles of your heart.
- interstitial lung disease (ILD), including idiopathic pulmonary fibrosis (IPF). These are conditions where inflammation or scar tissue builds up in your lungs.
- allergic alveolitis, which is an allergic lung reaction to certain dusts you breathe in.
- industrial or occupational lung diseases such as asbestosis, which is caused by being exposed to asbestos.
- bronchiectasis. This is when your bronchial tubes are scarred and distorted leading to a build-up of phlegm and chronic coughing.
- muscular dystrophy or myasthenia gravis, which causes muscle weakness.
- anaemia and kidney disease.
- being obese, lacking fitness, and feeling anxious or depressed can also cause you to feel short of breath. You might often have these issues alongside other conditions. Treating them is a vital part of treating your breathlessness.

What will happen when I see my doctor?

You may not actually feel out of breath when you see your doctor as you will be sitting down and may have only walked a short distance. So it is important to think about how you will describe your breathlessness or bring someone with you who can help.

Your doctor should ask you what you would like to get out of your first appointment. If they don’t, let them know and agree what is possible in the time you have together.

Tip: if you have a phone with a camera, you could video the sort of activities that cause your breathlessness so you can show your doctor what it looks or sounds like.

Getting a diagnosis for daily long-term breathlessness can take some time as all possible causes will be considered. Your doctor or other health care professional might need to ask you to take repeated tests and to try various treatments before they can be sure of the cause. It is also likely that there may be a number of conditions and factors to get under control, so you and your health care professional should discuss setting priorities and goals.
Is it possible to measure breathlessness?

The scale most commonly used by GPs and specialists to measure breathlessness is the Medical Research Council (MRC) breathlessness score. When you see your health care professional, they should show you this chart when they ask how breathless you are. It works well because it shows what your breathlessness stops you from doing. Choose the grade that describes you when you are at your best.

It is also important to say what you used to be able to do; what people of your age around you do that you think you should be able to do, and what your personal goals are for your day-to-day activity. Use local landmarks such as bus stops, shops and hills when you talk to your GP or practice nurse as this is a useful record to have in your notes. As they are local your description will mean something to them.

You might currently have one cause of daily breathlessness, but it’s important to recognise that you might develop other causes over time. If things change, it is important to discuss with your health professional whether anything else might be going on that could also be treated.

The MRC breathlessness scale

<table>
<thead>
<tr>
<th>Grade</th>
<th>Degree of breathlessness related to activities</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Not troubled by breathlessness except on strenuous exercise</td>
</tr>
<tr>
<td>2</td>
<td>Short of breath when hurrying on the level or walking up a slight hill</td>
</tr>
<tr>
<td>3</td>
<td>Walks slower than most people on the level, stops after a mile or so, or stops after 15 minutes walking at own pace</td>
</tr>
<tr>
<td>4</td>
<td>Stops for breath after walking about 100 yards or after a few minutes on level ground</td>
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<tr>
<td>5</td>
<td>Too breathless to leave the house, or breathless when undressing</td>
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Some questions your doctor should ask you

- How long have you been feeling breathless and how quickly did it come on?
- Does it come and go or is it there all the time?
- Is there any pattern to the breathlessness?
- Does it start or get worse at any particular time of day?
- Does it come on or get worse when you lie flat?
- Do you smoke?
- What is your job or occupation?
- Is your breathlessness related to certain times at work?
- Does anything bring it on? For example, pollen, pets or medication?
- Do you have a history of heart, lung or thyroid disease or of anaemia?
- Have you made any changes in your life because of your shortness of breath?
- Do you feel worried or frightened, depressed or hopeless?
- What have you done to help you cope with the way you are feeling?
What your doctor might do to help diagnosis

- Check your blood pressure, temperature, heart rate and rhythm, the number of breaths you take every minute, and the oxygen levels in your blood by using a sensor on your skin.
- Do some blowing tests. These include a breath carbon monoxide test using a monitor to see if you have inhaled smoke or polluted air and a test called microspirometry. You will be asked to blow hard into a machine for a few seconds. It will show if your airways are narrow.
- Listen to the sounds coming from your chest, and look and feel how your chest moves as you breathe.
- Check your height, weight, waist and body mass index.
- Examine your head, neck and armpits to see if your lymph glands are swollen.
- Check your heart and check if fluid is building up in your ankles or lungs.
- Look at your nails, as they sometimes give clues to the cause.
- Look at your skin and joints to help to focus further investigations.
- Your doctor might spot signs that you seem anxious or depressed and ask you to do a simple questionnaire.

You might be referred for more tests at your surgery, a local testing centre or hospital such as:

- a chest X-ray.
- a spirometry test. This is a blowing test to check your lung function.
- an electrocardiogram or ECG. If your breathlessness is intermittent you might be asked to wear a portable recorder for 24 hours, or seven days, to record your heart’s electrical activity.
- blood tests to detect any anaemia, thyroid, liver, kidney, allergy and heart problems.

What can I do to manage my breathlessness?

You and your doctor should work together to treat the causes and get control over your breathlessness. Your doctor can suggest suitable support for you and might make a plan with you to manage your breathlessness better.

Things you can do to help yourself include:

- **If you smoke, get help to quit.** There is very good evidence that seeing someone who is trained to help people stop smoking, as well as taking regular nicotine replacement and/or anti-craving medicines, increases your chance of being a long-term non-smoker.
- **Get a flu jab every year.**
- **Try some breathing techniques.** There are various techniques that you can use to help you control your breathing. If you practise these and use them every day, they will help you when you are active and getting breathless. They will also help you manage if you get short of breath suddenly. Some examples are:
  - **Blow as you go:** breathe out when you are making a big effort, such as standing up, stretching or bending.
  - **Pursed-lips breathing:** breathe out with your lips pursed as if you were whistling.

The Association of Chartered Physiotherapists in Respiratory Care publishes patient leaflets on breathing exercises and positions to reduce breathlessness. You can access these at [www.acprc.org.uk/publications](http://www.acprc.org.uk/publications) or by calling our helpline.
• **Be more physically active.** Physical activity could be walking, gardening, walking the dog, housework or swimming as well as going to a gym. If you have a lung condition, you can be referred to a pulmonary rehabilitation (PR) programme by your doctor, and if you have a heart problem there are cardiac rehabilitation services too. These classes help you to get control over your breathlessness, get you fitter and are also lots of fun. If you are breathless due to loss of fitness, ask your GP or practice nurse about local referral schemes that support people who want to be more active.

• **Drink and eat healthily and manage your weight.** Your doctor can help you work out what your healthy weight should be. If you are carrying excess weight you will require more effort to breathe and move around, and it will be more difficult to get control over your feelings of breathlessness. If you have diabetes, ask about educational events to help you to manage your weight and a more balanced diet. Your GP or practice nurse can help you to find healthy eating support services.

• **Get treatment if you feel stressed or anxious.** If your area doesn't have a dedicated breathlessness clinic that provides this help, ask your GP to refer you to a counsellor or clinical psychologist who will be able to help. Sometimes medicines can help too, so talk to your GP about this.

• **Use the right medication in the right way.**
  - Some breathlessness is treated with **inhalers**. If you have an inhaler make sure somebody regularly checks you know how to use it correctly. Don’t be afraid to ask to try different types if you can’t get on with the one you have. Use them as they have been prescribed to you. Ask your doctor or nurse for a written description of how to manage your lung condition.
  - If you take **tablets or capsules or liquids** to control your breathing make sure you know why you are taking them and ask your health care professional or pharmacist if you don’t. If your breathlessness is due to heart failure you might need to adjust your treatment according to your weight and how much your ankles swell. Make sure you have a written plan that you understand.
  - If you have COPD, you might have a **rescue pack** so you can start treatment early if you have a flare-up. This must always come with a written action plan that you understand and agree with.

**Can oxygen help?**

Evidence shows that oxygen will not help your breathlessness if your blood oxygen levels are normal. But if you have a condition that means the level of oxygen in your blood is low, oxygen treatment can make you feel better and live longer. Your GP can refer you for advice and tests. You should see a specialist team to assess your needs and ensure you use oxygen safely. They will monitor your use of oxygen and change your prescription as your needs change. Never use oxygen without specialist advice.