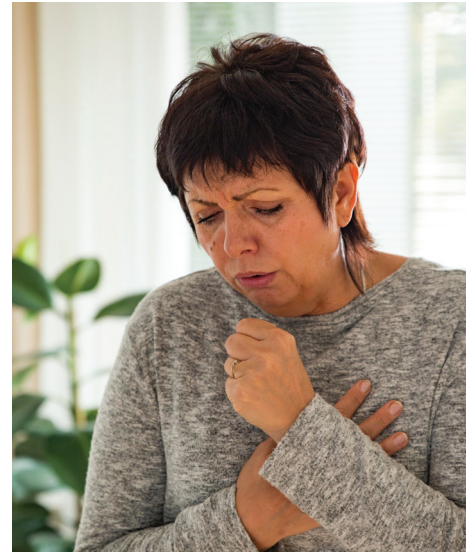


Sudden Breathlessness

A sudden breathlessness crisis happens when difficulty breathing comes on quickly, severely, and does not go away. It can be very scary for you, your family, and those who care for you. Not everyone with a breathing problem has episodes of sudden breathlessness. But people with advanced disease of the lungs, heart, or nervous system and those near the end of their life are more likely to experience a sudden breathlessness crisis.



How do I or someone else know if I am having a sudden breathlessness crisis?

If you have breathing problems, your breathing sometimes will be worse than usual. You can even feel breathless when your oxygen levels are normal. This does not necessarily pose a crisis. For example, your breathlessness may be similar to past episodes that went away on their own or with your usual treatment.¹

A sudden breathlessness crisis, on the other hand, is very severe and does not go away as usual.

You might describe it as “the worst shortness of breath I’ve ever experienced.... Feeling like I am suffocating.... It’s very hard to breathe.... It comes out of nowhere I am not able to take a deep breath.... I’m feeling panicky.” This time, your breathing “feels” like a crisis or seems different than past episodes of breathlessness (see figure below). This is sometimes called a “fight or flight” reaction.

What can make sudden breathlessness worse?

Breathlessness may get worse in the following situations:

- Developing pneumonia or infection
- A flare-up (exacerbation) of chronic lung or heart disease
- Environmental factors such as air pollution, exposure to wood smoke, fragrance/perfume, high humidity, wind, or cold/hot weather
- Traveling to high altitudes
- Fear, anxiety, and panic

The mind-body connection is very strong, and emotions such as a feeling of being out of control, fear of dying, or anger all can trigger an acute breathlessness crisis.

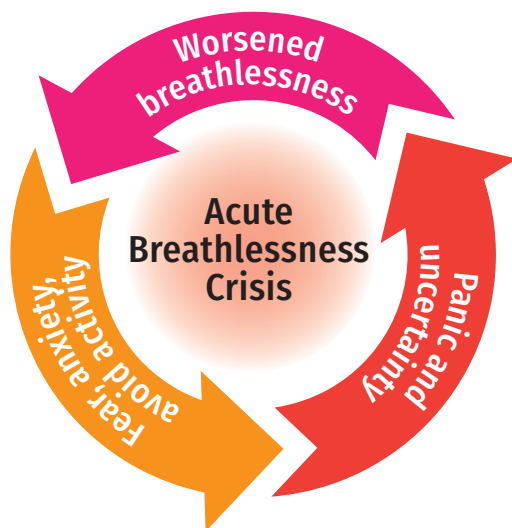
What can be done for severe breathlessness?

You may think that your only option is a trip to the emergency room. Although calling 911 is an option, a plan or “ritual” that you have worked out and practiced in advance can help you manage your symptom, decrease your fears and sense of panic, and give you a feeling of control. This fact sheet provides some ideas to help you and your family/caregivers develop a step-by-step plan in advance to cope with sudden breathlessness.

The best time to learn and practice the strategies outlined in the plan is when you are not in distress.

Your personalized plan will include both the strategies that work best for you, and the order in which you try them. Not all strategies work for everyone.

- Pay attention to approaches that have worked before, such as pursed lip breathing, inhaled or oral medications for breathlessness or a fan directed at the cheek from 6-8 inches away, and start with them.¹
- Change to a position that helps ease your breathing. If sitting, lean forward with your elbows resting on a table or place your hands or elbows on your knees in a “tripod position”. If standing, use the back of a chair, kitchen or bathroom counter to do the position.



CLIP AND COPY

How to use this handout:

Read about Sudden Breathlessness when you and your support team are relaxed and well. Use your personal experience to fill out the plan on p. 3. Post copies of the plan on your refrigerator, keep a copy in your wallet, and share it with friends and family. Practice the plan in advance when you are feeling well so you are prepared when you need it.

“COMFORT” Suggestions for your personalized plan

Here is a sample plan that you and your family/caregivers can modify and practice so that you are ready when you experience a sudden breathlessness crisis. Review your plan with your healthcare team to be sure you are in agreement with how to manage any episodes of sudden breathlessness.

C: Call for help. Setup emergency contacts on your mobile or home phone. Have a baby monitor with video and 2-way talk or a hand bell to let family or caregivers in the home know you need help. Develop a hand signal for your family or caregiver to indicate that “I need help!” Practice with your support team how to stay calm in your words and actions.

O: Observe for signs of breathing distress such as fast breathing, seeing neck muscles tighten, the stomach moving in with force during breathing, pounding sensation in the chest, or a fearful look on the face. Oximetry and biofeedback² may be helpful, if you have been previously trained in them.

M: Medications Know which medications are used for breathlessness crisis and have them ready for use. These may be an inhaler, nebulizer, morphine, and/or medicine for anxiety.³

F: Fan to face. Also, try opening the window or cooling the room. If driving in a car, open the window or turn on the air conditioner for air to circulate across the face.

O: Oxygen. Use oxygen if it has been prescribed. Other options to consider: Clear secretions (sputum) if needed by using cough techniques, a mucus clearance device or high frequency chest wall therapy; apply continuous positive airway pressure (CPAP) or Bi-level positive airway pressure (BiPAP) as instructed by your health care providers.⁴

R: Reassure and relax. Slow down! Do things that make the surroundings calm. Examples are looking outside, guided imagery, prayer, or saying a mantra (repeating a meaningful word that brings peace). Ask someone to give you a light hand or back massage or use acupressure if you’ve been trained. Breathing strategies in addition to pursed lip breathing include counting inhalations/exhalations, focus on movement of lower ribs, and gentle spinal movement with each breath. Watch TV programs or listen to music or podcasts that are calming. Using mindfulness or gentle exercises like restorative yoga or tai chi may be beneficial.⁵

T: Take your time, don’t rush. Many times people do not want to talk when having severe breathlessness.

Practice the plan with your whole family so everyone knows what to expect. Even the youngest child can help by bringing an inhaler. You may need to change the plan when you find that something does not work. Remember, breathlessness is uncomfortable and frightening but not necessarily harmful. You can recover from breathlessness. Your effective plan or ritual may reduce your fears and help you avoid a hospitalization or emergency room visit.

Healthcare Provider’s Contact Number:

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1 See ATS Patient Information Series fact sheet Breathlessness

2 See ATS Patient Information Series fact sheet on Pulse Oximetry

3 See ATS Patient Information Series fact sheet Using Your Metered Dose Inhaler and Nebulizer Breathing Treatments at Home.

4 See ATS Patient Information Series fact sheet, Continuous Positive Airway Pressure for Adults with Obstructive Sleep Apnea.

5 See ATS Patient Information Series fact sheet Mindfulness for Those with COPD, Asthma, Lung Cancer, and Lung Transplantation.

Resources:

American Thoracic Society

- www.thoracic.org/patients
 - Emergency/Disaster
 - Breathlessness
 - Integrative Medicine
 - Metered dose inhaler (MDI)
 - Nebulizer breathing treatments

This information is a public service of the American Thoracic Society. The content is for educational purposes only. It should not be used as a substitute for the medical advice of one’s healthcare provider.

Sudden Breathlessness

What you can do:

Your customized treatment plan:

