



Breathlessness

Everyone feels out of breath some of the time. It's normal to get out of breath when you exert yourself.

This booklet is for you if:

- you have been diagnosed with a medical condition that causes breathlessness and
- you find it difficult or uncomfortable to breathe most days – or you get breathless unexpectedly and feel you can't control your breathing

This long-term breathlessness is known as **chronic breathlessness**.

You can read about managing your breathlessness, the treatment available, breathing control techniques and lifestyle changes that can help.

If you feel breathless on a daily basis but the cause hasn't been diagnosed yet, talk to your doctor.

➤ Find out more about possible causes of breathlessness and how to get a diagnosis at [blf.org.uk/breathlessness](https://www.blf.org.uk/breathlessness)

What is breathlessness?

Getting out of breath is normal. It's a natural response when your body needs more oxygen and energy when you do something that requires physical effort. For example when you run for a bus. Getting out of breath when we exercise is a positive reaction and is part of keeping our bodies fit and strong.

But some people get out of breath when they're not physically exerting themselves. They unexpectedly find it difficult or uncomfortable to breathe, and may feel they can't control their breathing.

Sometimes this kind of breathlessness is long term, and people experience it every day. This long-term breathlessness is known as **chronic breathlessness**. It develops gradually and lasts for weeks, months or years. Sometimes people also cough, bring up phlegm or feel wheezy.

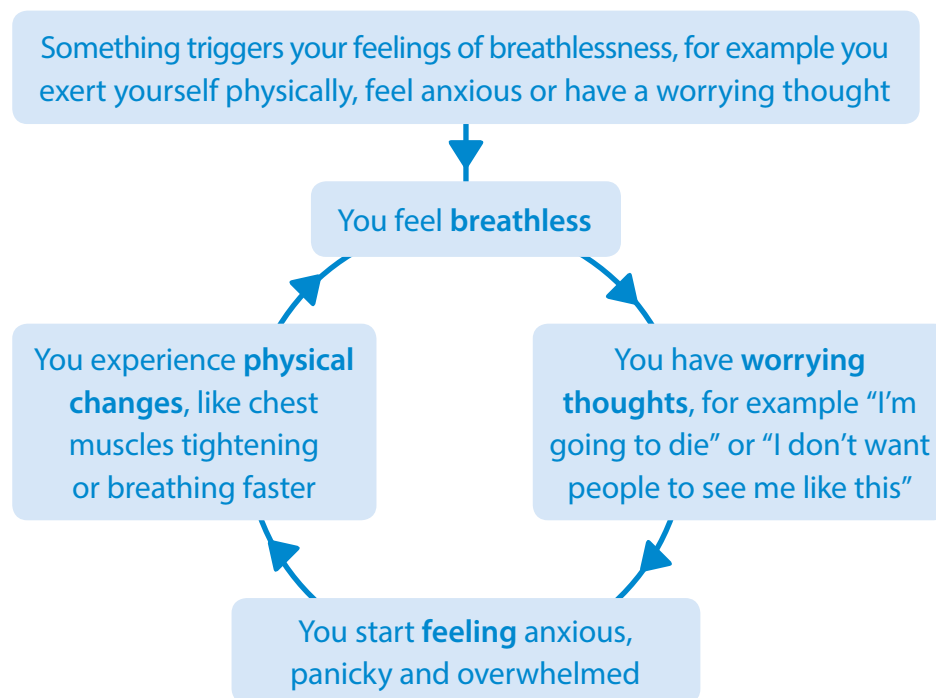
Many people think that chronic means 'bad'. But it means 'long-term'.

Breathlessness is not only a physical symptom. It's also a feeling that affects the way we think and act. We each feel it differently:

- You may feel hot, panicky or overwhelmed.
- Your chest might feel so tight it feels like the breath cannot get in.
- You might feel you're suffocating or not being able to get enough air and you feel you need to take deep breaths but can't.
- You might feel breathing is very hard work, and exhausting.

Thoughts about breathlessness

Getting out of breath can be frightening and make all of us feel anxious. That anxiety or fear can increase how breathless we feel.



As we get more anxious, we may become more aware of our breathing, breathe faster and tense up our breathing muscles. This can lead to a panic attack.

A panic attack is when your body's normal response to fear, stress or excitement is exaggerated, and you get a rapid build-up of physical responses. As your body tries to take in more oxygen, your breathing quickens. Your body also releases hormones so your heart beats faster and your muscles tense.

During an attack, you might feel you can't breathe and:

- have a pounding heart
- feel faint
- sweat
- feel sick
- have shaky limbs
- feel you're not connected to your body

Learning to stay calm when you get breathless will help you to feel in control of your breathing. The breathing techniques on page 8 onwards can help you slow down and control your breathing. You may also find relaxation techniques or mindfulness help to ease your feelings of tension and anxiety.

There's also professional help. Lots of research has linked breathlessness with feelings of anxiety and depression. There's evidence that therapies such as cognitive behavioural therapy (CBT) help to improve breathlessness, and anxiety and depression linked to it. 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.

Sometimes medicines can help too, so talk to your GP about this.

Why am I short of breath?

Breathlessness is a symptom. There are many possible underlying causes. But the main causes are:

lung conditions	heart conditions
anxiety	being unfit

If you get breathless every day, you might have been diagnosed with one of these causes. Often there's more than one. And others can develop over time. If you notice changes in your breathing, tell your doctor. Conditions that cause long-term breathlessness can often be treated but some cannot be fully reversed.

To find out more about causes of breathlessness, visit [blf.org.uk/breathlessness](https://www.blf.org.uk/breathlessness)

Getting out of breath can be very frightening. You may feel anxious about it or feel embarrassed about other people seeing. The good news is that you can get help. Your doctor can make a plan with you to manage your breathlessness. You can learn control your breathing.

How breathless am I?

The scale health care professionals usually use to measure breathlessness is the Medical Research Council (MRC) breathlessness scale. This does not recognise other aspects of breathlessness – such as how you think or feel about getting out of breath.

The MRC scale (on page 4) shows what your breathlessness stops you doing. Your grade is the one that describes you when you're at your best.

Take our online breath test to measure your breathlessness. Answer 10 quick questions at [blf.org.uk/breathtest](https://www.blf.org.uk/breathtest)

Grade	Degree of breathlessness related to activities
1	Not troubled by breathlessness except on strenuous exercise
2	Short of breath when hurrying on the level or walking up a slight hill
3	Walks slower than most people on the level, stops after a mile or so, or stops after 15 minutes walking at own pace
4	Stops for breath after walking about 100 yards or after a few minutes on level ground
5	Too breathless to leave the house, or breathless when undressing

Treating breathlessness

Your health care professional can prescribe treatments or refer you to services to improve your lung function.

If you smoke, get help to quit

If you smoke, the best thing you can do for your health is to quit. Your health care professional and pharmacist can help you find ways that make it easier for you. You're four times as likely to quit with help from support services and medication.

Have a look at [blf.org.uk/smoking](https://www.blf.org.uk/smoking) to find out more.

Pulmonary rehabilitation

If you have a lung condition, your health care professional may suggest a pulmonary rehabilitation (PR) course. If you have chronic heart failure, PR may also help. If you have other heart problems there are cardiac rehabilitation services too. These classes help you control your breathlessness, make you fitter and are fun. There's good evidence PR helps to reduce breathlessness and to improve your general wellbeing.

For more about PR and keeping active more generally, visit [blf.org.uk/keep-active](https://www.blf.org.uk/keep-active)

Inhaled medication

Some breathlessness is treated with inhalers. Some control inflammation in the lungs. Others help to relax the muscles around your airways so they can open wider. Some inhalers work quickly and are taken often. Others work for 12 or 24 hours and you take them once or twice a day.

It's very important to use your inhaler correctly to get the full benefit. Make sure your health care professional teaches you how to use your inhaler, and regularly checks you use it correctly. Ask your doctor or nurse to write down how to manage your condition with inhalers, and use them as prescribed. Ask to try different types if you feel the one you have isn't helping.

If you're given a spacer to use with your inhaler, try to use it. Spacers – large empty plastic containers you fix to your inhaler – help to get more medication straight into your lungs.

Tablets, capsules and liquids

Tablets, capsules or liquids to control your breathing can work for some lung conditions, but may have side effects such as nausea, vomiting or constipation. Make sure you have a written plan you understand from your health care professional to explain what you are taking and why.

Some tablets help to open up the airways, some may help you clear sputum and some control allergic processes that contribute to your lung condition. Medicines can control your blood pressure or heart rhythm, increase the pumping strength of your heart or help your body get rid of excess fluid. 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.

Rescue pack

If you have some lung conditions, such as chronic obstructive pulmonary disease (COPD) or bronchiectasis, you might have a rescue pack of medication to keep at home. This is to help you to start treatment quickly if your symptoms flare up. For example, antibiotics treat bacterial infections that cause your sputum to change colour of your sputum and steroid tablets tackle the inflammation in the lungs making you breathless and wheezy.

Your health care professional will explain when and how to take this rescue pack. Agree a written plan with them. Let your doctor know as soon as you start the pack and get an appointment to be seen.

Get your vaccinations

Flu and pneumonia vaccines aim to reduce the risk of a chest infection.

- Get a flu jab every year.
- Ask your doctor about getting the one-off pneumonia jab.

Can oxygen help?

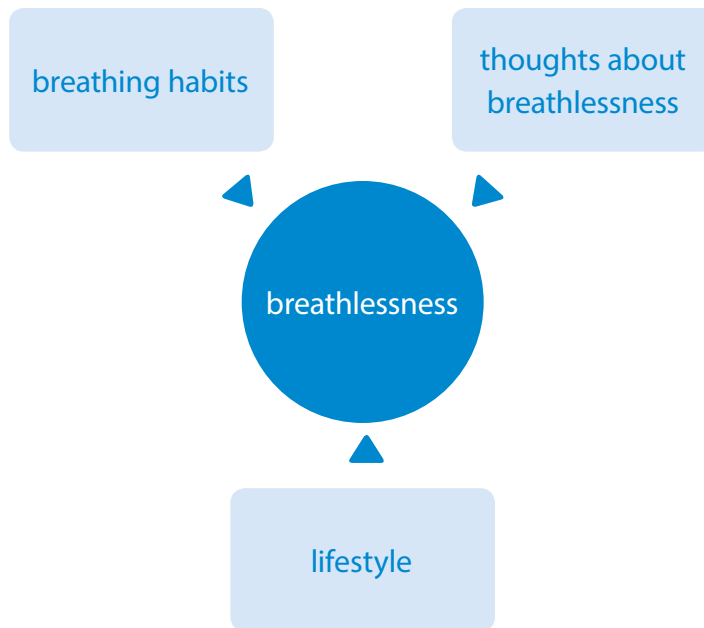
Oxygen treatment won't help your breathlessness if your blood oxygen levels are normal. But if the level of oxygen in your blood is low, your GP can refer you to a specialist team to assess your needs. Never use oxygen without specialist advice.

To find out more about treatments for:

- › lung conditions, visit [blf.org.uk/support](https://www.blf.org.uk/support)
- › heart conditions, visit [bhf.org.uk](https://www.bhf.org.uk)

How can I manage my breathlessness?

Evidence suggests that how breathless you feel doesn't always match up with how well you're getting air into your lungs. This is because it's not just lung function that affects how out of breath you feel. Breathlessness is also affected by how you breathe, your lifestyle and how you think and feel about your breathing:



So thinking about all three can help.

Breathing habits

Unhelpful breathing habits will make you feel more out of breath.

When you're out of breath, you may feel like you need more air. So you may start to take more air into your lungs or breathe faster. You might then not take the time to fully empty your lungs as you breathe out. This means you use the top of your chest more to breathe, instead of using your whole lungs. Breathing like this is more work – your muscles will get tired more quickly, and you'll feel even more out of breath.

The good news is there are breathing techniques you can use to breathe more efficiently and to feel in control of your breathing. If you practise these techniques and use them every day, they'll help you when you're active or if you suddenly feel short of breath.

Breathing control

Breathing control means breathing gently, using the least effort. It will help when you're short of breath or feeling anxious. This type of breathing is commonly used in yoga.

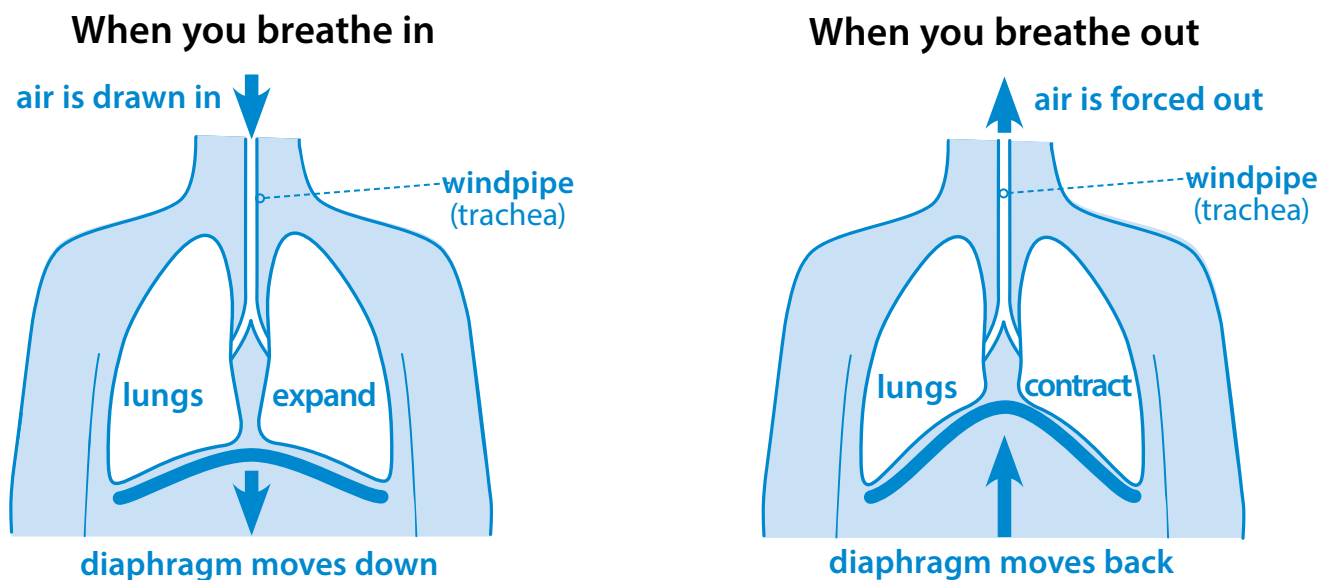
To get used to breathing control, it helps to practise when you're sitting, are relaxed and not out of breath.

Breathing control is about the best use of your main breathing muscle, your diaphragm. The focus is on reducing tension, using your shoulder and neck muscles to get into the best position for you to breathe easily. Your diaphragm contracts when you breathe, so pulling the lungs down, stretching and expanding them. It relaxes back – into a dome position – when you breathe out, reducing the amount of air in your lungs.

Get into a comfortable position, with your arms supported. Let your shoulders and body be relaxed and loose.

- Put one hand on your chest and the other on your abdomen
- Close your eyes to help you relax and focus on your breathing
- Slowly breathe in through your nose, with your mouth closed. If you're relaxed, the air will reach low in your lungs. Your abdomen will move out against your hand. If your breathing is controlled, the hand on your chest will hardly move
- Breathe out through your nose. Your abdomen will fall gently. Imagine all the tension in your body leaving as you let the air out
- Try to use as little effort as possible and make your breaths slow, relaxed and smooth. With every breath out, try to feel more relaxed and calm. Gradually try to breathe more slowly

When fully in control of your breathing, your out breath should be longer than your in breath. There should be a natural pause at the end of your out of breath.



There's more information from specialist physiotherapists at www.acprc.uk/publications

Breathing techniques

Talk to a physiotherapist to find the best techniques for you. If you don't already have one, ask your doctor to refer you.

Use breathing control combined with any of these breathing techniques.

Blow-as-you-go

Blow-as-you-go helps make tasks and activities easier. Use it while you're doing something that makes you breathless. You can use it with pursed-lips breathing.

How do I do it?

Breathe in before you make the effort. Then breathe out while you're making the effort. For example, when standing up, breathe in before you step or stand up, and then blow out as you stand up. Try pursing your lips as you blow out.

Paced breathing

Paced breathing is useful when you are active, for example, walking or climbing stairs. You pace your steps to your breathing. You can use it at the same time as pursed-lips breathing and blow-as-you-go.

How do I do it?

Count to yourself as you walk or move. For example, breathe in for one step and then take either one or two steps as you breathe out.

Take more steps as you breathe in or as you breathe out, if that feels better for you. Try different combinations to find what works best for you - for example, one step in, two steps out.

Pursed-lips breathing

Pursed-lips breathing can be used at any time to help you control your breathing. This helps to empty all the air out of your lungs and is particularly useful for people with COPD as the narrowed airways can trap air in the lungs.

How do I do it?

Breathe in gently through your nose, then purse your lips as though you're going to blow out a candle. Blow out with your lips in this pursed position. Imagine blowing out a candle when you breathe out. Blow out only for as long as is comfortable – don't force your lungs to empty.

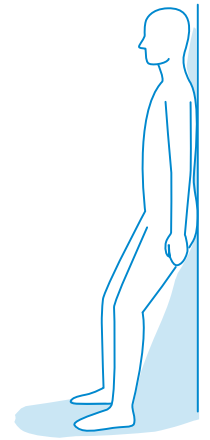
Positions to help you recover

Use these positions to help you practise your breathing control, or to recover your breath when you get breathless.

Stand leaning backwards or sideways against a wall

Have your feet slightly apart, about one foot or 30cms away from the wall. Relax your hands down by your sides. If you prefer, rest your hands or thumbs in your waistband or belt loops, or across the shoulder strap of your handbag.

This position can be helpful for most people with a lung condition. Other helpful positions vary depending on whether you have an obstructive or a restrictive lung condition.



Obstructive and restrictive lung conditions

Obstructive or restrictive lung diseases both cause breathlessness, but they result from different processes in your lungs:

- obstruction refers to how quickly you can move air in and out
- restriction refers to the total amount of air you can get into your lungs

If a healthy person takes a big breath in and then blows out as hard, they will be able to get over 70% of the air out of their lungs in one second.

In **obstructive** lung disease, such as COPD, asthma or bronchiectasis, it takes longer to empty your lungs. The airflow is slower because the disease makes your airways narrower or lungs less elastic. Because breathing out is slower, the person may need to breathe in again before they have emptied their lungs. This makes breathing uncomfortable.

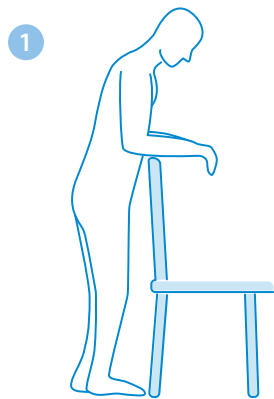
In **restrictive** conditions, you cannot fill your lungs with air because your lungs are restricted from fully expanding. This happens when the lungs themselves are stiff or because there is a problem with the chest wall or breathing muscles.

The most common restrictive lung conditions are interstitial lung disease, such as IPF, others are obesity or a curved spine.

Some people find it difficult to breathe because they have lots of phlegm in their airways. This happens with lung conditions such as bronchiectasis. If you have lots of sputum, clearing your sputum may help you feel less out of breath. Find out more at blf.org.uk/bronchiectasis

Here are some suggestions to try. They are based on what physiotherapists find works – but everyone is different, so see what works for you. Your physiotherapist can help.

Positions for obstructive lung conditions



Stand leaning forward (figure 1): Lean from the hips, with your forearms resting on something at the right height, such as a chair or kitchen work surface.

When you're out and about, you could lean on a walking stick or a frame with wheels. If you're shopping, use your supermarket trolley.

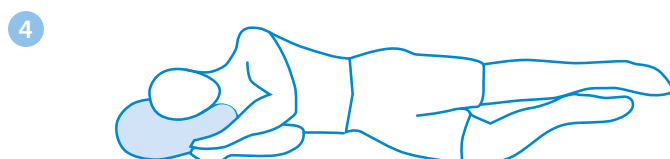


Sit leaning forward (figure 2): lean resting your elbows on your knees.



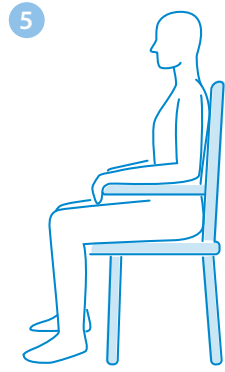
Sit leaning forward at a table (figure 3): Rest your head and arms on pillows on a table when you're really short of breath.

Side lying with leg on the floor bent at knee (figure 4). Lie on your side with pillows under your head. Make sure the top pillow supports your neck. Slightly bend the knee of the leg you're lying on, with your top leg straight. This can help when you're breathless when you're resting, such as when your symptoms flare up.



Positions for restrictive lung conditions

Sit upright in a firm chair (figure 5): If your chair doesn't have arms, rest your arms on your thighs. Let your wrists and hands go limp.



High side lying (figure 6): Lie on your side with pillows under your head and shoulders. Make sure your top pillow supports your neck. Slightly bend your knees, hips and top leg.

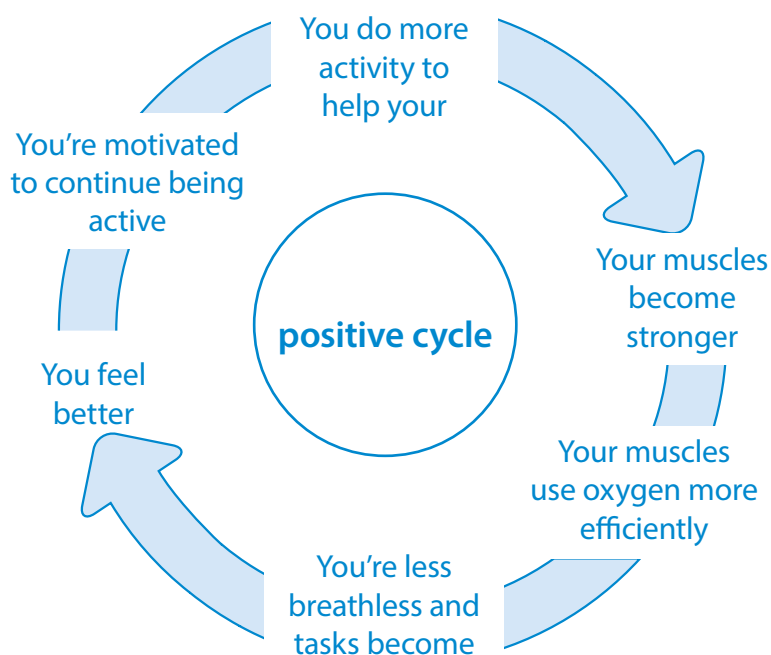


Changing your habits

A few changes in your everyday habits can make a big difference. And they can help you cope.

Be more physically active

It's normal to get out of breath when you exercise. If you avoid activity that makes you get out of breath, this will make your breathlessness worse. Your muscles will get weaker and need more oxygen to work. As your muscles recover after exercise, they adapt to use oxygen more efficiently. So, with regular exercise, you'll need to breathe less to do the same activity.



Over time, doing physical activity that makes you a little bit out of breath will help you feel less out of breath doing everyday activities. Physical activity includes walking, gardening and doing housework, as well as activities like swimming, playing sport and going to a gym.

When you're being active, pace yourself so you don't get tired too quickly, and use breathing control to help.

Aim to be as independent as you can. This helps keep you active. If you get breathless doing things like washing, dressing or cooking, an occupational therapist may be able to help. They can give you information and equipment to make tasks easier.

Remember: getting out of breath when you're active is good for you!

Take up singing

Some people find that joining a singing class for people with lung conditions helps with their breathing.

› There is a network of established quality assured singing groups around the UK. Have a look at **blf.org.uk/singing**

Eat healthily and manage your weight

Your weight can affect your breathing. If you're overweight, it takes more effort to breathe and move around, and it can be more difficult to control your feelings of breathlessness. If you're underweight, your breathing muscles will be weaker.

Your health care professional can help you to work out your healthy weight and to find healthy eating support services.

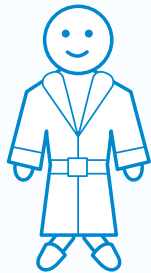
› For more information, go to **blf.org.uk/eating-well**

Sex and breathlessness

Living with a condition that leaves you short of breath can get in the way of sex and relationships.

› You can read more about how to manage your breathlessness during sex at **blf.org.uk/sex**

Top tips to manage your breathlessness



- Use a towelling robe after showering or bathing, as you'll use less energy than drying off with a towel.
- Hold a handheld battery fan near your face if it helps you to feel less breathless.
- Plan your day in advance to make sure you have plenty of opportunities to rest.
- Find simple ways to cook, clean and do other chores. You could use a small table or cart with wheels to move things around your home, and a pole or tongs with long handles to reach things.
- Put items that you use frequently in easy-to-reach places.
- Keep your clothes loose, and wear clothes and shoes that are easy to put on and take off.
- Use a wheeled walking frame to help improve your breathlessness.

Get in touch with us to find support near you.

Helpline: 03000 030 555

Monday to Friday, 9am-5pm

Ringing our helpline never costs more than a local call and is usually free, even from a mobile.

helpline@blf.org.uk

blf.org.uk

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We value feedback on our information. To let us know your views, and for the most up to date version of this information and references, call the helpline or visit blf.org.uk