



BREATHLESSNESS

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We feature real life stories in this booklet. Some names have been changed. The information in this booklet has been reviewed by independent experts. We have made every effort to ensure that the information provided is correct. Asthma + Lung UK cannot accept liability for any errors or omissions, and policy, practice or medical research may change. If you are concerned about your health, you should consult a doctor.

Everyone feels out of breath at times. It's normal to get out of breath when you exert yourself. This information is for people who feel breathless at other times too and want to find out more.

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.

You can read about managing breathlessness, available treatments, breathing control techniques and lifestyle changes that can help. You might want to share this booklet with your family and carers too, so they can support you in managing your breathlessness.

If you feel breathless often 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

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 part of keeping our bodies fit and strong.

But some people get out of breath whether or not they're 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 most days. 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.

To many people, chronic means 'bad'. But it actually means 'long-term'.

If you get out of breath suddenly and unexpectedly, this is called **acute breathlessness**. Acute breathlessness needs to be tested or treated straight away as it can be a sign of a new medical condition. If you or someone you are with is having difficulty breathing, don't delay getting help. Call your GP for an urgent appointment or NHS 111 if your GP surgery is closed. But in an emergency, call 999 for immediate medical attention.

If you have chronic breathlessness caused by an underlying condition like chronic obstructive pulmonary disease (COPD) or asthma, you may be able to help yourself feel less acutely breathless by starting treatment yourself following an action plan agreed with your health care professional.

How we feel when we get out of breath

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

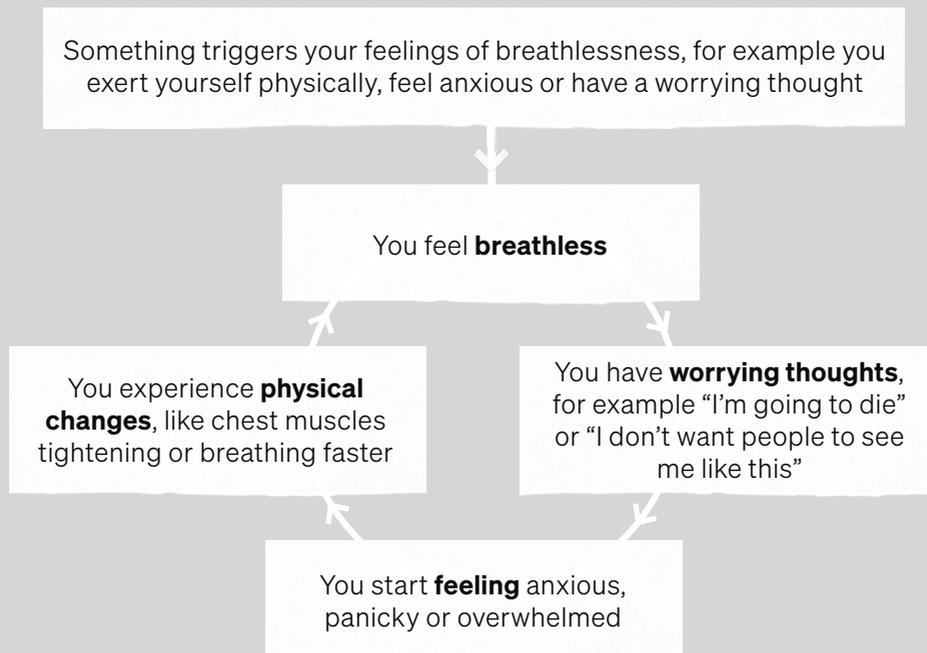
- You may feel hot, panicky or overwhelmed
- Your chest might feel so tight, it feels like you can't breathe in properly
- You might feel you're suffocating, and you need to take deep breaths but can't
- You might feel breathing is very hard work and exhausting.

“ When I walk with my husband and our dog, sometimes I have a determined effort to speed up a little. I know I should let myself get out of breath, but then my chest tightens. I feel I am breathing against a wall and the wheezing and coughing start. ”

Margaret

Thoughts about breathlessness

Getting out of breath can be frightening and make you feel anxious. That anxiety or fear can increase how breathless you feel. As we get more anxious, we may become more aware of our breathing, breathe faster and tense our breathing muscles. This can lead to a panic attack.



“ It’s embarrassing because when you appear fit and well, people don’t realise that terror can strike you at anytime, especially when anxiety exacerbates the situation. ”

Wendy

Panic attacks

When your body’s normal response is exaggerated, you get a rapid build-up of physical responses. This is a panic attack. Your breathing quickens and your body also releases hormones so your heart beats faster and your muscles tense.

During a panic attack, you might feel you can’t breathe and:

- have a pounding heart
- feel sick
- feel faint
- have shaky limbs
- sweat
- 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 pages 18–19 can help you slow down and control your breathing.

Some of the following thoughts may help you to feel less breathless:

- I have had this feeling before
- I know it will go away
- I am going to lean forward
- I am going to use my handheld fan
- I am going to relax my shoulder and neck muscles and allow them to “flop” and “drop”
- I can do this – I am doing it now and I am OK.

You may also find relaxation techniques or mindfulness help to ease your feelings of tension and anxiety.

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 on a regular basis, 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. It's important to learn how to manage long-term breathlessness, so that you can live as well as possible with it.

To find out more about causes of breathlessness, visit blf.org.uk/breathlessness

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

It's good to talk to other people about your fears and worries. Your friends and family can help to support you if they understand more about what you're going through.

There's also professional help. 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. You could also ask to be referred to a respiratory physiotherapist. Sometimes medicines can help too, so talk to your GP about this.

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 shows what your breathlessness stops you doing. Your grade is the one that describes you when you're at your best.

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

Take our online breath test to measure your breathlessness. Answer ten quick questions at blf.org.uk/breathtest

Treating breathlessness

Your GP can prescribe treatments or refer you to services to improve your breathlessness.

Pulmonary rehabilitation (PR)

If you have a lung condition, your health care professional may suggest a 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 improves 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. If you're prescribed inhalers, it's very important you use your inhaler correctly to get the full benefit. Make sure your health care professional teaches you how to use your inhaler, and once a year checks you use it correctly. You can also check how to use your inhaler online at www.asthma.org.uk/advice/inhaler-videos

Ask your pharmacist, nurse or doctor 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

Medicines that you swallow, in the form of tablets, capsules or liquids can work for some lung conditions, but may have side effects such as nausea, vomiting or constipation. Make sure you have a clear written plan 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 helping 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 a lung condition like 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. A rescue pack may contain antibiotics to treat bacterial infections that cause your sputum to change colour and steroid tablets to tackle the inflammation in your lungs.

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

If you smoke, get help to quit

If you smoke, the best thing you can do for your breathlessness is to quit. Your health care professional and pharmacist can help you find ways that make it easier for you. You're around three 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.

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?

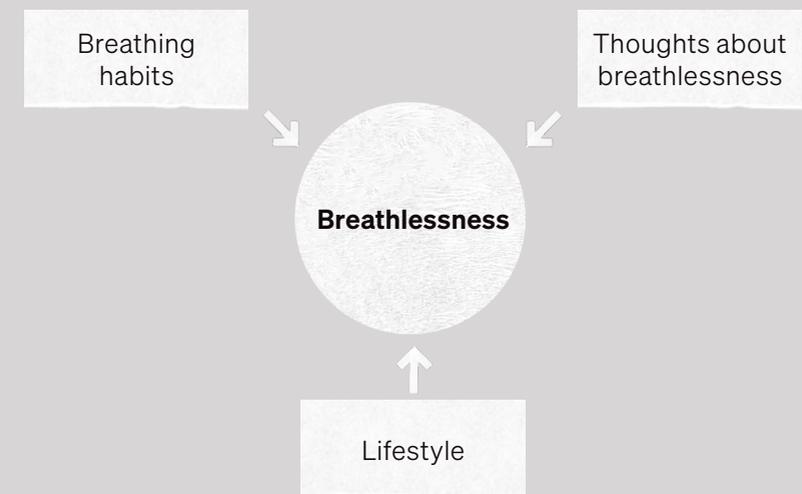
Oxygen treatment won't help your breathlessness if your blood oxygen levels are normal. But if the level of oxygen in your blood is low, your GP can refer you to a specialist team to assess your needs. Never use oxygen without specialist advice.

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 that well with the results of lung function tests and scans. This is because it's not just lung function that affects how out of breath you feel. Breathlessness is also affected by the way you breathe, your lifestyle and how you think and feel about your breathing:



How you think and feel about your breathing is important. For example, a worrying thought can make you feel anxious and make you feel breathless. This could perhaps make you feel panicky and bring on physical symptoms such as a tight chest or fast breathing.

When you have a long-term lung condition, you can feel anxious. Because being anxious interacts with your physical symptoms and can increase your feelings of breathlessness, it's important to talk to your health care professional about what help is available for you. Read more about coping with anxiety and a lung condition at [blf.org.uk/anxiety](https://www.blf.org.uk/anxiety)

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.

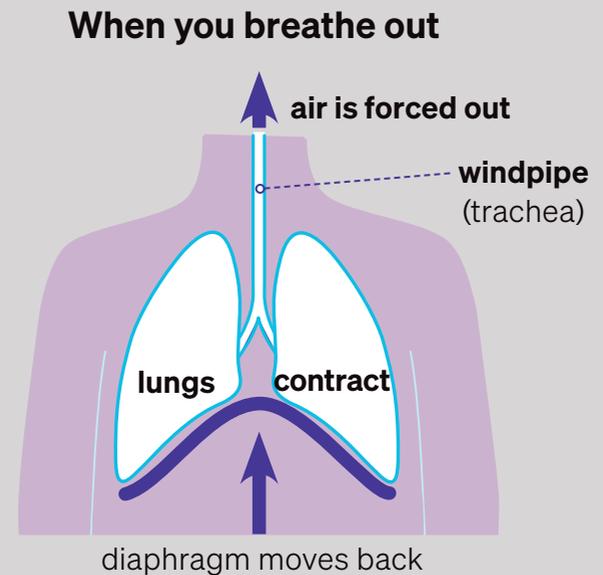
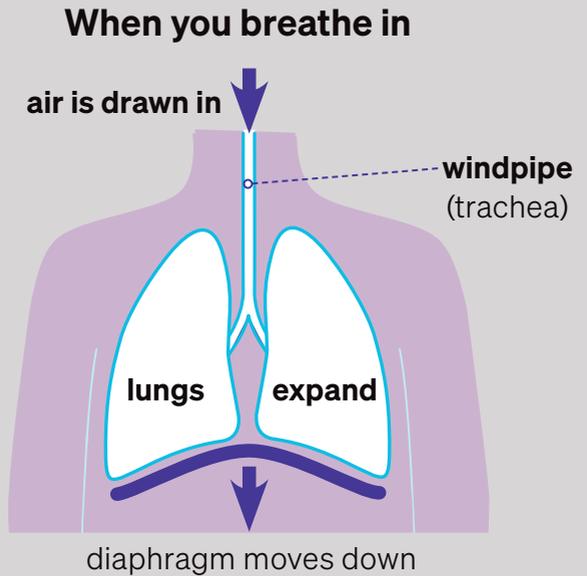
The good news is there are breathing techniques you can use to breathe more efficiently and to feel in control of your breathing. If you practise these techniques and use them every day, they'll help you when you're active or if you suddenly feel short of breath.

Breathing control

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

To get used to breathing control, it helps to practice when you are sitting, 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 and using your shoulder and neck muscles to get into the best position for you to breathe easily. Your diaphragm contracts when you breathe. This pulls 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.



Breathing control

Get into a comfortable position, with your arms supported on arm rests or your lap. Let your shoulders and body be relaxed and loose.

- Put one hand on your chest and the other on your stomach.
- 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 stomach 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 stomach 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. Gradually try to breathe more slowly.

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

Tip: Hold a handheld battery fan near your face (about six inches) – this should help you feel less breathless.

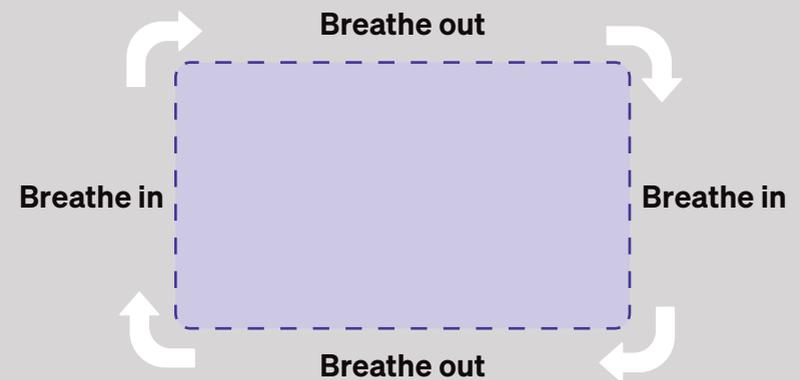
Remember the three Rs

Breathing control is sometimes known as relaxed tummy breathing. Try to remember the three Rs:

- R** Rise the tummy as you breathe in
- R** Relax the breath out
- R** Rest and wait for the next breath to come

Breathe a rectangle

Once you've mastered the relaxed tummy breathing technique, you might find it useful to imagine or look at a rectangle. Wherever you are, there is often a rectangle to be seen, whether this is a book, TV, computer, tablet screen, door, window, table top or even a picture on the wall. Follow the sides of the rectangle with your eyes as you use relaxed tummy breathing. Gradually slow the speed at which your eyes move around the edge of the rectangle to slow your breathing.



There's more information from specialist physiotherapists at www.acprc.org.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 (page 14) combined with any of the breathing techniques below. Some people find some techniques suit them better than others. Give them all a go and see what works well for you.

Pursed-lips breathing

This technique 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.

Blow-as-you-go

This technique 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

This technique 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, two steps in, two steps out.

Tips:

- Use a towelling robe after showering or bathing, as you'll use less energy than drying off with a towel.
- Break down your activities into smaller tasks that are more manageable.
- Put items 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 with a seat to help you be more active.
- Don't be afraid to ask for support when you need it!

Positions to help you recover from breathlessness

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, and you can use this when you're at home or out and about. 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.

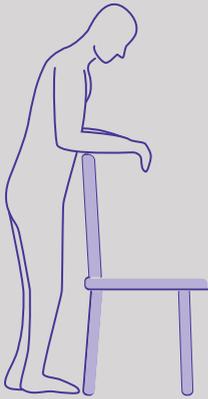
The most common restrictive lung conditions are interstitial lung disease, such as IPF, others are obesity or a curved spine.

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

Tip: Find simple ways to cook, clean and do other chores. You could use a small table or a cart with wheels to move things around your home, and a pole or tongs with long handles to reach things.

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



1 Stand leaning forward: 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.

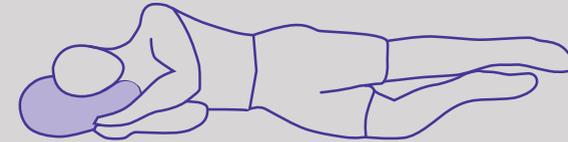


2 Sit leaning forward: lean resting your elbows on your knees.



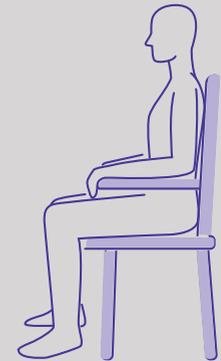
3 Sit leaning forward at a table: rest your head and arms on pillows on a table when you're really short of breath.

4 Side lying with leg on the floor bent at knee: 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 are lying on, with your top leg straight. Having your legs apart may also help. This position can help when you're breathless when resting, such as when your symptoms flare up.



Positions for restrictive lung conditions

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



6 High side lying: 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.



Living well with breathlessness

Although living with breathlessness can be difficult, many people find ways to cope with it and still enjoy life. Living well with breathlessness involves adapting how you do things to be as independent as possible, while also accepting that at times you may need support from others.

A few changes in your everyday habits can make a big difference and 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.

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

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. If you think this could benefit you, ask your GP to refer you to an occupational therapist.



Tip: Plan your day in advance and pace yourself to make sure you have plenty of opportunities to rest.

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. So, 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 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, but it doesn't need to.

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

Tip: Be patient with yourself and give yourself time to do things. Try to recognise the things you are achieving.

Get help

Call our helpline on **0300 222 5800**

We are here to help if you want:

- answers to your questions – whether it's about coping with symptoms, your rights or finding equipment
- clear and trustworthy information about breathing problems and living with a lung condition
- to get in touch with your local support group

Our friendly team are here Monday to Friday 9am to 5pm. Ringing will cost the same as a local call. It's usually free, depending on your call package, even from a mobile.

Or visit AsthmaAndLung.org.uk to find support information or to join our web community

- get support and information blf.org.uk/support-for-you
- sign up to our newsletter blf.org.uk/signup
- find your local support group blf.org.uk/breathe-easy
- join our web community healthunlocked.com/asthmalunguk-lung

Help others like you

You can help us to fund more research to find cures and new treatments, and make sure everyone has the support they need. We're the only UK charity looking after the nation's lungs, and we rely on your donations. Visit AsthmaAndLung.org.uk or call **0300 222 5800**.

**Together we fight
for lung health**



Helpline: **0300 222 5800**

[AsthmaAndLung.org.uk](https://www.AsthmaAndLung.org.uk)

Asthma + Lung UK 2022

BK29 Version 3

Last reviewed: November 2020

Due for review: November 2023

Asthma and Lung UK is a charitable company limited by guarantee with company registration number 01863614, with registered charity number 326730 in England and Wales, SC038415 in Scotland, and 1177 in the Isle of Man.