

COPD patient returns to active lifestyle thanks to pulmonary rehabilitation

April 18 2014, by Laura Dawahare And Allison Perry

In the waiting room at UK HealthCare's Pulmonary Rehabilitation Clinic sits a large binder labeled "Success Stories." Inside are pages and pages of testimony from patients who discovered a renewed quality of life as a result of their experience. "I can walk through the mall with my grandkids again," reads one. "Most important thing I've ever done," declares another.

But certain words appear repeatedly throughout: encouragement, support, compassion, welcoming. It's evident that these patients adore the staff that helps them breathe more fully again.

Mike Graham, 53, of Harrodsburg, hopes to add his testimony to the binder soon.

A life-long scuba diver, Graham was making a dive in Findlay, Ohio, last year when suddenly he could not catch his breath. "I panicked," he recalls. "At first I thought my tank was bad, but when I got back to the surface and still couldn't catch my breath, I knew something was wrong." His [primary care physician](#) diagnosed chronic [obstructive pulmonary disease](#) or COPD; a visit to UK in December confirmed the diagnosis. Graham was put on an inhaler to reduce airway constriction and referred to UK's pulmonary rehab program.

Just nine weeks in, Graham already delights in the return to many of his beloved activities. A self-described gentleman farmer, Graham has always shared an emotional bond with his cattle. "They're my kids," he

says. Before he began his treatment, Graham couldn't climb a flight of stairs without losing his breath. "I can play with my kids again," he says with a twinkle. "A walk to their pasture used to be out of the question, but now I get to give them their 'sweet feed' treats of molasses and ground corn every morning."

COPD is an umbrella term used to describe progressive [lung diseases](#) such as emphysema, chronic bronchitis, or non-reversible asthma. The disease is characterized by increasing breathlessness, frequent coughing, wheezing, and/or tightness in the chest. COPD is the No. 3 killer in Kentucky and the No. 5 killer for all Americans. It affects an estimated 24 million individuals in the U.S.

"Perhaps the cruelest aspect of COPD is that it is initially a silent disease, developing for years without noticeable shortness of breath," says Dr. John McCormick, director of the Pulmonary Rehabilitation Program at UK. "Often, by the time the patient comes to us, the disease has already seriously compromised lung function, medications are less effective in controlling symptoms and patients become reliant on supplemental oxygen, all of which reduces a patient's quality of life hugely."

However, Dr. McCormick explains, pulmonary rehab can be the lifeline that returns sufferers to a fuller life. The magic comes in the form of an interdisciplinary team of pulmonologists, nurses, exercise physiologists, dietitians and lifestyle therapists—also known as Beth Cundiff, Nancy Kessler, Jacob Stone, Craig Staub, Heather Leger and Audrey Darville.

Through exercise training, psychosocial support, and education, this team helps patients restore strength and endurance, reduce disease symptoms, self-manage common complications and know when to call for help. Patients who complete the program also often report fewer symptoms of depression and anxiety, which are commonly associated

with chronic lung diseases. And, says Dr. McCormick, because it's been demonstrated that patients who participate in such programs actually end up needing less "health care" in the long run, COPD becomes less of a financial burden for those patients, particularly since many health insurance plans cover pulmonary rehabilitation programs.

"If it weren't for these people, the program would just be a roomful of machines," Graham says, counting names off using his fingers. Craig and Jake encourage me with my training and constantly monitor my heart rate and oxygen levels, which allows me to train as hard as possible without worry. Dr. McCormick and Beth taught me about how the lungs work, which really helped me understand my COPD. And Audrey helped me leave my 35 year smoking habit behind."

"I could go on and on," he says with a smile. "Absolutely everyone here contributes to my learning in a powerful way."

And that, Dr. McCormick says, is precisely the point.

"Exercise is, of course, an essential component of the program," he says. "But our patient care team goes beyond the basics by facilitating therapeutic support among participants, their family members and friends and creating a milieu where patients encourage and learn from each other."

On any given day in the clinic, there are patients on treadmills, bicycles, elliptical machines, or lifting weights. Some are on supplemental oxygen, and all of them wear equipment that monitors pulse, blood pressure and oxygen levels while they work out. Exercise physiologists crisscross the room, checking on patients and offering advice and encouragement.

Behind the exercise area is a classroom where knowledgeable clinic staff teach participants about the disease process, share breathing and other

relaxation techniques, offer nutritional advice, and facilitate idea sharing and troubleshooting among members of the group.

There are even field trips—Graham tells how dietitian Heather Leger took a group of [patients](#) to a local grocery store for a hands-on tutorial on reading nutrition labels and making healthy food choices.

"This has been an amazing process of discovery," Graham says. "I've learned so much about my COPD and how to live a full life in spite of it. If I can help just one other person by sharing what I've learned, it will be worth the effort." To that end, Graham has volunteered for a program with the National COPD Foundation that will pair newly-diagnosed sufferers with mentors like Graham who can offer advice and encouragement.

"And," he says, "I'm already hounding my brother, my sister, and two of my diver friends to quit smoking."

Those diver friends in particular are taking notice. Graham returned to scuba diving last week at the same quarry in Findlay, Ohio, where he first realized that something was terribly wrong.

"I took basically the same dive," he says. "And when I got to the spot where I panicked last time, I paused for a moment, smiled and gave my diving buddy the 'OK' sign, and then kept on going."

Provided by University of Kentucky

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