

## **Depression plagues many with COPD**

June 17 2016, by Chuck Green, Healthday Reporter



(HealthDay)—Struggling with chronic obstructive pulmonary disorder (COPD) may raise the risk of depression among patients with the incurable respiratory illness, two new studies suggest.



One report, from scientists at Manchester Metropolitan University in England, found one in four <u>patients</u> with COPD suffered persistent depressive symptoms over the three years of the study.

If untreated, <u>depression</u> can have a negative effect on the patients' overall health and the effectiveness of their treatment, the researchers noted.

A second study from the University of Texas analyzed data from a random sample of 5 percent of Medicare beneficiaries diagnosed with COPD between 2001 and 2011. The researchers found that 22 percent of those patients had one or more psychological disorders.

The study also showed that the odds of 30-day readmission to the hospital were higher in patients with COPD who had depression, anxiety, psychosis, alcohol abuse and drug abuse, compared with those who did not have these disorders.

Both studies were published recently in the journal *CHEST*.

COPD is an umbrella term for progressive lung diseases that include chronic bronchitis and emphysema. It affects 24 million Americans, and is characterized by increased breathlessness, coughing and wheezing, according to the COPD Foundation.

Depression makes it tougher for those with COPD to adhere to needed therapies, especially since they tend to fault themselves for developing the disease by smoking, explained Dr. David Mannino. He is a professor of medicine in the division of pulmonary, critical care and sleep medicine at the University of Kentucky.

"They call it 'the shame-and-blame game' because a lot of people who have it [COPD] feel like they brought it on themselves and got what they



deserved," said Mannino, who was not involved in either study. "Part of this is the message that smoking's bad and no one should do it. That leads to the misguided interpretation that 'smokers are bad people.'

However, COPD can also be caused by factors like asthma or dusty work places, Mannino noted.

Dr. Norman Edelman, scientific consultant for the American Lung Association, said depression is relatively common among those with a disabling chronic illness such as COPD.

However, "what's not so clear and very important is whether depression itself makes the disease worse, or how it could," he added.

Exercise can be a COPD patient's biggest ally, according to Edelman.

Those with COPD should work out to their level of tolerance, said Edelman, a professor of preventive medicine and internal medicine at the State University of New York at Stony Brook.

"Otherwise, their muscles get deconditioned, and that makes their shortness of breath on any kind of exercise worse," he said.

But, "you can imagine that someone depressed doesn't want to exercise, go to the mall or the store," Edelman acknowledged.

One way to overcome that mindset is by incorporating psychological counseling into COPD care as long as it's feasible, he said.

Meanwhile, family and friends can also help.

"The thing to do is engage the patient: Don't let Joe sit in the corner and watch television all day," Edelman said. "Get him up and out, doing



things he can tolerate. And ask questions. That's not so easy. If you ask old Grandpa if he's depressed, he'll snarl at you."

So, the situation has to be handled "sensitively and gently," Edelman said.

Still, Mannino said, patients have to assume their share of responsibility for their own welfare.

"The key intervention for people still smoking is to stop," he said.

Beyond that, COPD patients should make sure they're using their inhalers correctly.

"Nearly half our patients aren't using them as directed," Mannino said. "Every device is a little different. If you're not using them right, you're not getting the correct dose."

**More information:** Find out more about COPD at the <u>COPD</u> <u>Foundation</u>.

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