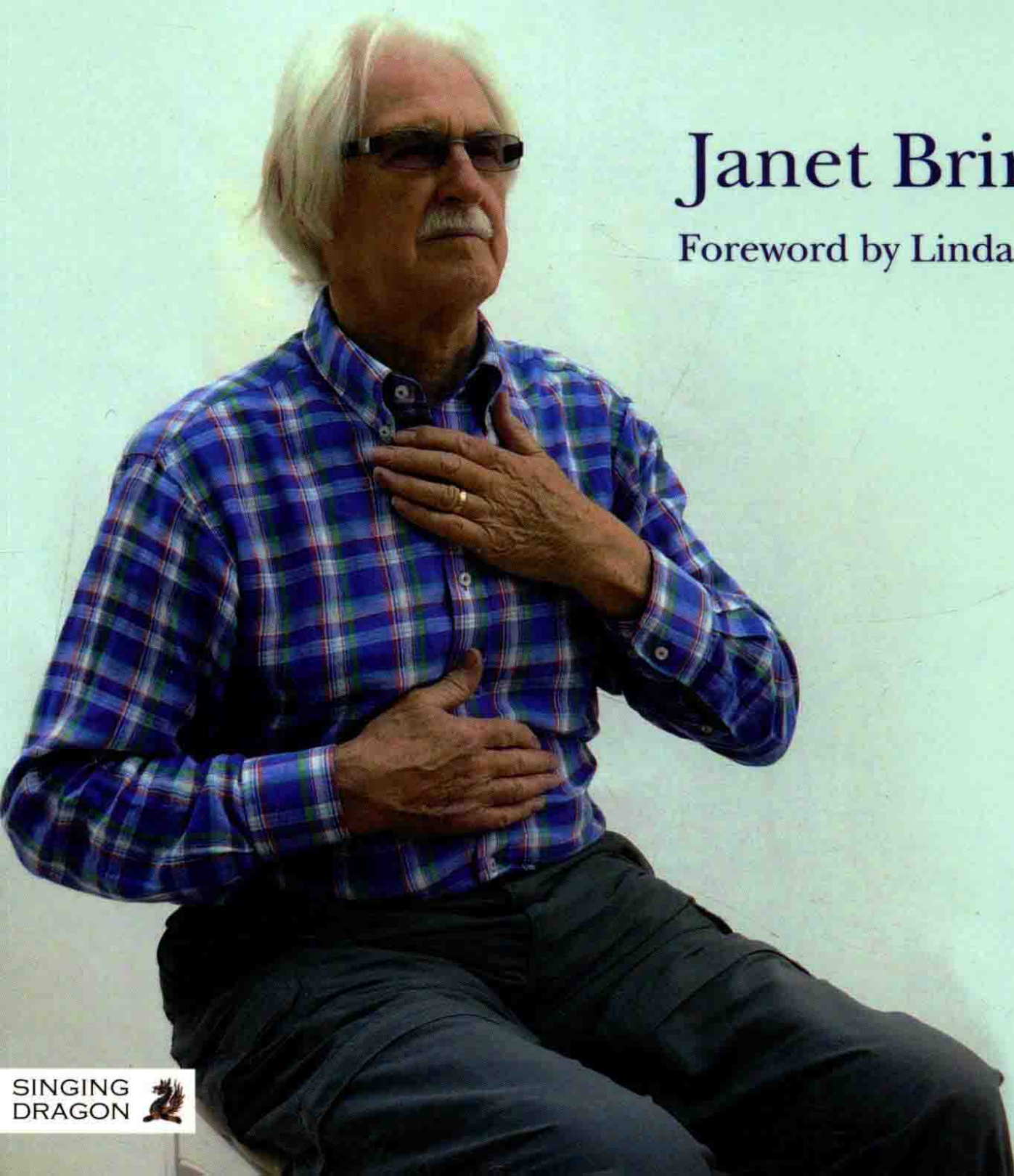


A 28-Day Breathing Exercise Plan

Breathe Well and Live Well with COPD

Janet Brindley

Foreword by Linda Shampan



Breathe Well and Live Well with COPD



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Contents

Foreword: A personal experience of using breathing techniques by Linda Shampān	7
ACKNOWLEDGEMENTS	9
INFORMATION FOR MEDICAL PROFESSIONALS	11
Suitability of exercises	11
Contraindications	12
1 Will breathing techniques help my COPD?	13
Make time for your health – it will pay dividends	14
Is there any evidence that these breathing techniques work?	15
Are the techniques suitable for me?	16
2 What do I have to do?	17
How much time and effort?	18
How do these techniques work?	22
Where do the breathing techniques come from?	22
Learning with a teacher	23
3 Feeling short of breath?	25
What to do when you feel out of breath	25
The calm breathing technique	26
Why does this exercise improve my breathing?	30
Memory test	32
4 Breathing through your nose	35
A 15-minute nose-breathing walk	36
Problems with walking	37
Your nose is a personal air-processing system	38

	Breaking the mouth-breathing habit	40
	Pursed lips breathing	41
	Nose-clearing exercise	43
5	Controlling your cough	49
	The stop cough technique	50
	Crunchy biscuits, eating and breathing	53
	Controlled coughing to clear phlegm	54
	Preventing chest infections	56
	Memory test	57
6	Breathing more easily	59
	How are you breathing now?	59
	Relaxed breathing	62
7	The Plan: Days 1 to 14	67
	Choose the right place	67
	Think about what you want to achieve	68
	Day 1–14 diary	69
8	Reducing breathlessness	73
	Understanding lower chest breathing	73
	Becoming less sensitive to breathlessness	75
	Breathing with pauses	76
	Talking and laughing	78
	Knee bends	79
9	Stretching for better breathing	83
	Hold up the sky	83
	Elbow circles	85
	Gentle twist	86
	Sideways bend	87
10	The Plan: Days 15 to 28 and beyond	89
	Aches and pains?	89
	Why do I feel short of breath?	90
	Day 15–28 diary	90
	Completed the 28-day plan?	91
	Support groups	94
	Please spread the word!	95

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	Day 1–14 diary	69
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	Understanding lower chest breathing	73
	Becoming less sensitive to breathlessness	75
	Breathing with pauses	76
	Talking and laughing	78
	Knee bends	79
9	Stretching for better breathing	83
	Hold up the sky	83
	Elbow circles	85
	Gentle twist	86
	Sideways bend	87
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	Aches and pains?	89
	Why do I feel short of breath?	90
	Day 15–28 diary	90
	Completed the 28-day plan?	91
	Support groups	94
	Please spread the word!	95

Foreword

A personal experience of using breathing techniques

In my younger days I'd trained as a nurse, so I thought I already understood the basics of lungs and breathing. What a life-changing surprise it was, many years later at the age of 50, to find a breathing teacher who showed me the essentials of how to really breathe efficiently and to improve my quality of life; I had long-standing asthma and a recent diagnosis of moderate Chronic Obstructive Pulmonary Disease (COPD).

The three key breathing elements which transformed my health were changing to nose-breathing, learning how to keep breaths gentle and controlled, and breathing into my lower chest. All of these are covered in this book.

Now, aged 63, I appreciate that having the benefit of these breathing exercises has enabled me to live well with COPD, to continue working, to engage in physical activities such as yoga, and to enjoy a varied social life.

Breathing and emotions are closely connected, and feeling short of breath can trigger a range of feelings, such as anxiety, fear or frustration; for me the hardest one is feeling irritable. I find it helps to acknowledge to myself whatever

the feeling is, give it time to settle and sometimes I explain to other people that I just need some time, on my own, to sort the breathing out.

I am lucky to have a supportive doctor who has shown interest and encouraged me in these self-help methods, alongside using conventional medication on an ongoing basis. What else helped me? Singing – in groups and workshops!

*Linda Shampān
UKCP Registered Psychotherapist
and qualified Buteyko teacher*

Acknowledgements

My first debt is to all the people who have been in my breathing classes: patients, students, teachers and men, women and children with breathing problems who have helped me to modify my teaching to meet their needs.

I am particularly grateful to Kathryn Godfrey, Dr James Oliver and Gillian Austin for their support over many years, giving me the opportunity to pass these breathing techniques on to many more people than I would have been able to do alone.

My thanks are due to my willing models Lorraine Jeapes and Joan Coare, and my brother Robert Arcus. Finally, I must thank Alan, my husband, who read each chapter as it was written and rewritten and managed to keep me calm during the process.

Information for medical professionals

Many respiratory physicians and therapists now believe that a significant number of their COPD patients breathe in a dysfunctional way; and that this complicates their underlying respiratory disease. These patients need direction to correct their breathing, and this book has been written to help them to improve their day-to-day breathing.

Suitability of exercises

For the majority of people with COPD the breathing techniques in this book are completely safe to use. The exercises focus on calming breathing, awareness, nose-breathing and controlling coughing. The primary aims are to reduce hyperventilation, limit hyperinflation and increase fitness.

However, patients with severe and very severe COPD (including those who regularly use oxygen or those who have lost their normal respiratory drive) should approach the exercises with caution and only use what is helpful to them. The *knee bends* exercise (page 79) probably should be avoided by patients with severe COPD as it involves breath holding, which may not be helpful or pleasant for them.

Contraindications

It is recommended that the breathing exercises are not used by COPD patients who also have the following conditions:

- Severe emphysema with heart failure
- Kidney failure (especially if on dialysis)
- Current organ transplant (e.g. kidney, lung, liver, etc.)
- Previous brain haemorrhage or brain tumour
- Known arterial aneurysm
- Recent heart attack or stroke (three months)
- Lung cancer or any cancer requiring current treatment
- Active duodenal or stomach ulcer
- Uncontrolled high blood pressure
- Cardiac pacemaker device
- Sickle cell anaemia
- Schizophrenia

The medical conditions quoted here are for illustration only and do not represent an exclusive list.