



COPD treatment program helps elderly patient dramatically reduce shortness of breath and improve strength and endurance needed for daily activities

Patient Profile

Patient: 91-year-old female

Chief Complaint: Shortness of breath after walking 1/2 block and fatigue

Diagnosis: COPD for the past 10 years

History & Symptoms: The patient had been a smoker for 40 years. She stopped 10 years ago. She has a non-productive cough with a bronchitic quality. She does not complain of PND with 2-pillow orthopnea. Her chest is well aerated with very fine rales at both bases. Her chief complaint is shortness of breath (SOB) after a half block, as well as significant fatigue. Her cardiopulmonary exam is otherwise negative, and she has a resting pulse of 84 and regular, and a BP of 110/60mm Hg.

Treatment Program

- The patient was provided with some basic information about her COPD, and then taught proper **Diaphragmatic Breathing** with **Pursed Lips**. She was then tested on our treadmill, where she was only able to ambulate at 1.0 MPH at 0% elevation for 30 seconds before becoming severely SOB with a pulse of 120 and BP of 120/60. O2 saturation was WNL on room air.
- Over the next few weeks in our program, the patient progressed to 5 min at 1.8 mph and 0% elevation with moderate SOB and a pulse ranging between 96 and 108. She had stable BP and O2 saturation.
- During treatment sessions, the patient was educated in proper nutrition for her level of disease and disability. These nutritional guidelines included a thorough explanation of the foods that are important to sustaining proper muscle health (such as proteins), as well as healthy energy foods (such as good carbohydrates and low CO2 producing foods) to sustain an endurance and strengthening program. The patient maintained excellent compliance with these nutritional guidelines.
- After a few months on our program, the patient can ambulate for 10 min at 2.0 MPH at 3% elevation, with moderate SOB and very stable vitals. Her weight has stabilized and actually increased slightly.



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- During this time, the patient was also introduced to our COPD **Progressive Strengthening Program**, which consists of predominantly upper body PRE's to increase accessory muscle strength and endurance. This was accomplished in our gym by strengthening the patient's accessory muscles with weight training equipment, as well as increasing upper body endurance through the use of our Upper Body Ergometer.

Results

The patient continues to perform all exercises extremely well during her physical therapy sessions, while maintaining very stable vital signs. Currently, she is experiencing less SOB during daily activities, and maintaining more energy throughout the day.

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