



Patient & Family Guide  
2019

# Opioids for Shortness of Breath in Advanced Chronic Obstructive Pulmonary Disease (COPD)



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# Opioids for Shortness of Breath in Advanced COPD

Shortness of breath is the most common symptom for patients with advanced Chronic Obstructive Pulmonary Disease (COPD).

Over time, shortness of breath can get harder to control. Sometimes standard COPD treatments do not help with shortness of breath enough to give you relief. This can make life harder for you and your family. Opioids (for example, morphine or similar medications) may help.

Feeling short of breath can be scary for you and your loved ones, but **being short of breath is not harmful**. Although you may limit your activities to avoid feeling short of breath, it is important to stay as active as you can. Being fit helps to reduce shortness of breath.

If you feel short of breath, you may think it's because your oxygen levels are low, but they may be OK. **Treating shortness of breath and correcting oxygen levels are not the same thing**. If your oxygen levels are OK, other treatments for shortness of breath may be needed.

## **What causes shortness of breath?**

Physical changes in the lungs and body caused by COPD lead to shortness of breath. There may also be non-COPD reasons for your shortness of breath. Talk with your doctor or other health care providers to make sure that any other causes of your shortness of breath are treated.

Shortness of breath affects the parts of the brain that help you think, feel, and remember. This is why shortness of breath affects everyone differently, even when their measured lung function is similar. Treatments for shortness of breath in advanced COPD help with physical, mental, and emotional effects.

**What are your questions?  
Please ask. We are here to help you.**

## How do opioids help with shortness of breath?

Opioids affect the parts of the brain that deal with emotions like fear and anxiety. They can change the way you experience shortness of breath. This can be done with opioid doses that are much lower than what is needed to control pain. For example, 1 mg of morphine syrup is similar to taking ¼ of a Tylenol® with Codeine No. 3.

Opioids may help you feel short of breath less often and make the uncomfortable feeling weaker. You may also find that your breathing does not take as much effort.

It is not always possible to completely relieve shortness of breath, but hopefully your breathing will get better. Opioids can be increased slowly over time as needed to help with worsening shortness of breath. They can also be decreased, changed, or stopped if you have side effects that bother you.

**Do not stop taking your opioids without talking to your doctor first.**

## **What kinds of opioids are used for shortness of breath?**

Shortness of breath may be chronic (happens most of the time), acute (happens suddenly), or both.

Chronic and acute shortness of breath are treated with different types of opioids. These may be long-acting or short-acting. The type of opioid used will depend on your symptoms. Your doctor will work with you to find the opioid that works best for you.

## **Are opioids safe?**

Taking opioids may worry you because of what you have heard about them. For example, you might worry about addiction, or think that medications like morphine are only used when a person is dying.

The goal is to help you control your symptoms so that you feel better. Normally it takes a much lower dose to relieve shortness of breath than it would to control pain.

## What are the possible side effects?

It may take a few days for the medication to work. Early side effects may include:

- › constipation (not being able to poop). This may continue even after your body is used to the medication.
- › nausea (feeling sick to your stomach)
- › drowsiness (sleepiness)

Drowsiness and nausea that doesn't go away are not common at the low doses we use. If they do happen, they often go away on their own or can be easily managed.

It is best to try to prevent constipation instead of waiting until it happens. Regular use of a stool softener (prevents constipation by making your stool (“poop”) soft) or laxative (treats constipation by moving stool out of the body) is almost always needed when taking opioids. These medications (such as RestoraLAX<sup>®</sup> or Senokot<sup>®</sup>) can help to keep your bowel movements regular. It is important to pay close attention to how often you pass a stool so that you can deal with constipation as soon as possible.

# Anxiety and depression

Shortness of breath can make you feel anxious or even panicked. Feeling anxious can also make your shortness of breath worse. Over time, dealing with the symptoms of advanced COPD can also make you feel “down,” depressed, or even hopeless.

Medications used to treat anxiety and/or depression are not generally given for shortness of breath, although they may help in some cases. If you have symptoms of anxiety and depression, talk with your doctor.

## Looking for more health information?

Find this pamphlet and all our patient resources here: <http://library.nshealth.ca/PatientGuides>

Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

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The information in this pamphlet is to be updated every 3 years or as needed.