

Lung Cancer: Managing Shortness of Breath



Dyspnea is the medical word for difficulty breathing. It's a common symptom in people who have lung cancer or have cancer that has spread to the lungs. Dyspnea happens when you have trouble moving air in and out of your lungs. You can also have dyspnea if your lungs aren't getting enough oxygen.

People who have dyspnea describe it as difficulty breathing or shortness of breath. They often compare it to feeling like they are suffocating or being smothered. In many cases, you may feel anxious or panic if you think you can't breathe. Often your anxiety and fears can make the dyspnea worse. By panicking, you can become more breathless and begin a cycle that is hard to stop.

Who gets dyspnea?

You may have dyspnea if you have lung cancer. Or you may have it if you have another type of cancer, such as breast cancer, that has spread to the lungs. It can also happen if you have any of these health issues:

- Anemia
- Pneumonia
- Blood clots in the lungs (pulmonary embolism)
- COPD (chronic obstructive pulmonary disease), including emphysema or chronic bronchitis
- Heart disease
- Excess weight
- Asthma or allergies

Some cancer treatments may damage the lungs and cause dyspnea. These include lung surgery, radiation to the chest (that affects the lungs), and certain medicines used to treat lung cancer.

How is dyspnea diagnosed?

Each person may experience dyspnea in a slightly different way. You may be asked to describe your breathlessness as mild, moderate, or severe.

Dyspnea may keep you from doing things you normally do with ease. Your healthcare provider may ask you how your dyspnea affects your daily life, your ability to exercise, and the quality of your life. Tell your provider how it impacts how far you can walk, how you eat, or even how you talk.

To help you talk with your healthcare provider about dyspnea, it may help to keep track of how it affects you. Keep a journal of when you have it, what makes it better, and what makes it worse. Write down questions you have and bring all this information with you to your appointments.

Your provider may also order tests to find out what is causing your dyspnea, if the cause isn't clear. These might include blood tests or tests of your heart or lungs.

How is dyspnea treated?

Dyspnea is usually treated by treating its cause. For example, if fluid is collecting in your lung, your healthcare provider may need to drain the fluid to ease the dyspnea. You may need chemotherapy or radiation therapy to shrink a tumor that is causing the dyspnea. If dyspnea is caused by an infection, you may need antibiotics. If a blood clot is found in your lung, you may need to take blood thinners.

Your healthcare provider may treat dyspnea with medicine. The type of medicine will depend on the cause. You may need:

- Bronchodilators to open your airways
- Steroids to help reduce swelling in the lungs
- Antianxiety medicines to help break the cycle of panic. This cycle can lead to more breathing problems.
- Pain medicines to make breathing easier

Your provider may also prescribe oxygen to help with your breathing. Ask your healthcare team about breathing and relaxation methods you can try on your own.

Living with dyspnea

You may find relief by doing relaxation exercises, meditation, or breathing methods. You may also be helped by conserving your energy and limiting your activities. These methods may also help control your anxiety. Anxiety control is an important part of treating dyspnea.

You may also find relief by changing the way you sit or sleep. Try sitting upright in a chair, leaning forward slightly, and resting your forearms on the arms of the chair or on your knees. This can help your lungs expand. Sleeping with several pillows or in a recliner can also help.

Here are two breathing exercises to help manage dyspnea. Always talk with your healthcare provider before trying these methods. You can also talk with a respiratory or physical therapist about how to manage dyspnea.

Diaphragmatic breathing

This is also called abdominal breathing. To do this type of breathing, first find your diaphragm. Here's how: Place your fingers just below your breastbone and breathe in. The muscle that moves is the diaphragm. The goal is to use your diaphragm to help you breathe rather than using your back, shoulders, or neck. Watch your diaphragm rise and fall as you breathe. You can also lie on your back and put a book on your belly (abdomen). Watch your breathing pattern as the book rises and falls.

Pursed-lip breathing

To do this type of breathing, pucker your lips like you're blowing out a candle. Take normal breaths. Breathe in through the nose. Then take twice as long to breathe out through the center of your mouth. This helps you slow your breathing and stay calm. You can do this anytime you feel short of breath, such as during or after exercise.

Sometimes dyspnea can't be managed at home. Or it's a sign of a new or problem that gets worse.

When to call your healthcare provider

Call your healthcare provider if any of these occur:

- Increased trouble breathing
- Changes in the amount or color of mucus
- Fever of 100.4°F (38°C) or higher, or as directed by your healthcare provider

Call 911

Call 911 if you have:

- Severe shortness of breath
- Confusion
- Trouble speaking

- Chest pain or pressure
- Skin, mouth, or nails turn blue or pale

© 2000-2027 The StayWell Company, LLC. All rights reserved. This information is not intended as a substitute for professional medical care. Always follow your healthcare professional's instructions
This information is not intended as a substitute for professional medical care. Always follow your Healthcare professional's instructions. Copyright Krames LLC.