BY COLLEEN MULLARKEY

Obesity Can Take Your Breath Away

The never-ending supply of holiday goodies finally has started dwindling, and once again, you are enlisting to fight in the battle of the bulge. That outfit from years ago has been calling your name, but you have an even stronger motivation to think about when planning your weight loss strategy — your lungs.

In addition to heart problems, diabetes, and a host of other health concerns, obesity also has been linked to respiratory diseases such as obstructive sleep apnea (OSA), chronic obstructive pulmonary disease (COPD), and asthma. A balanced diet and regular exercise can help you and your lungs get back into shape.

Obstructive sleep apnea

People with OSA awake several times a night because their airways can collapse or get blocked, causing them to stop breathing. Obesity is a well-documented risk factor for the condition — about 70 percent of those with OSA are obese. Some physical characteristics of obesity such as large tongue, large neck size, and narrow airways can worsen these airway problems.

DAVE PERILLO

See your doctor to discuss OSA if you experience feelings of choking or difficulty breathing during sleep, loud and habitual snoring, frequent awakenings at night, morning headaches, or daytime sleepiness. If your doctor suspects you have OSA, he will most likely refer you for further sleep studies, including a polysomnogram. Sleep specialists will use this test to observe your sleep patterns overnight with equipment to monitor your breathing and other vital signs.

If you have OSA, many treatment options can help to alleviate your symptoms. The most common treatment is a continuous positive airway pressure (CPAP) device. You will use a mask over your nose or mouth to gently blow air into your airways to keep them open at night. You can talk to your doctor about other options, including bariatric surgery, oral surgery, or an oral device to help keep your airways open.

COPD and asthma

An association between obesity and respiratory problems has emerged from numerous studies, dating back to the 1980s. Recent research suggests being overweight or obese increases the odds of developing asthma by 50 percent.

If you have chronic cough, excess mucus production, wheezing, or shortness of breath, talk to your doctor about the possibility of COPD and asthma, especially if you smoke or frequently are exposed to allergens. The doctor can perform pulmonary function testing with a small device called a spirometer. A quick, easy, and painless test will show the doctor exactly how your lungs are functioning.

While wheezing and shortness of breath are two key symptoms of COPD and asthma, you could be experiencing them because of the strain extra weight has put on your lungs or a weakness in your respiratory muscles. That is why it is extremely important to get pulmonary function testing done to confirm a diagnosis.

Easing the burden

Weight loss can improve many of these respiratory symptoms and decrease your risk of developing respiratory complications or disease. You may want to talk to your doctor, a nutritionist, or a dietitian about working with you to plan a weight loss program that includes a balanced diet, regular exercise, and good sleep habits. A healthy, active lifestyle can take a load off your mind, your weight, and your lungs. ■

Adapted from The National Sleep Foundation and "The effect of obesity on chronic respiratory diseases: pathophysiology and therapeutic strategies" by Magali Poulai, Mariève Doucet, Geneviève Major, Vicky Drapeau, Frédéric Sériès, Louis-Phillipe Boulet, Angelo Tremblay, and François Maltias.

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notes

Your doctor or therapist has given you this patient education handout to further explain or remind you about an issue related to your health. This handout is a general guide only. If you have specific questions, discuss them with your doctor or therapist.