

Dyspnea: What's Happening?

The act of breathing (simplified) happens in two simultaneous processes:

1. The brain asks the body to breathe
2. The body, if able, responds to that request by breathing

Dys: difficult, impaired, abnormal, bad, dysfunctional
Pnea: breathing, respiration

Dyspnea is a broad symptom category used to describe a person's subjective experience of breathing discomfort or difficulty; sometimes it is referred to as shortness of breath ([Pallium Pocketbook, 2020](#)).

A person feels shortness of breath when there's an imbalance between the brain's demand to breathe and the body's ability to breathe.

Dyspnea is a common symptom experienced by those living with life-limiting illness(es); incidence of dyspnea frequently increases as the illness(es) advance.

A person's experience of dyspnea is highly individual and can be associated with and exacerbated by physical and emotional distress.

Patients may characterize the dyspnea sensation as "tightness" or "suffocation," however, this can occur with or without objective evidence of respiratory distress ([Pallium Pocketbook, 2020](#)). The burden of this symptom and the subjective nature of the experience, make it imperative that health care team members regularly screen for and properly assess dyspnea.

Shortness of Breath



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Normally, when there is a balance between these two processes, there's a balance between the demand to breathe and ability to breathe, a person has no conscious awareness of breathing.

Complex Processes make Comprehensive Assessment Essential for Proper Management

Management of dyspnea requires an understanding of the mechanisms responsible for the dyspnea experience; for most patients, there are multiple processes at play to produce the symptom.

In response to the stressor of the life-limiting illness, the respiratory system physiology adjusts. This has an impact on over all respiratory function as well as the patient's perception of the adequacy of their own breathing. This perceptual feedback also works as a stressor that provokes further respiratory system adjustment. Worsening dyspnea experience results in decreased quality of life, and also physical functioning ([Jolley & Moxam, 2009](#)).

Through clinical assessment, evidence is gathered to justify appropriate treatment options to manage the patient's distressing experience of dyspnea and, if possible, the underlying causes of the symptom.

Dyspnea Assessment should include providing a:

- Calm and reassuring approach
- Head to Toe, Physical Assessment
- Comprehensive Symptom Assessment using:
 - validated assessment tools:
 - [Symptom Assessment Algorithm](#)
 - condition-specific assessment tools:
 - [Modified Medical Research Council \(mMRC\) Dyspnea Scale](#)
 - [COPD Assessment Test \(CAT\)](#)
 - [BODE Index for COPD Survival](#)