



Patient Education Sheet

Oncology Nursing Society
125 Enterprise Drive
Pittsburgh, PA 15275-1214
USA
+1-412-859-6100
www.ons.org



How Can I Manage Dyspnea?

Dyspnea is a shortness of breath or difficulty breathing caused by a combination of physiologic, psychological, social, and environmental factors. Dyspnea is estimated to occur in 15%–55% of patients with cancer.

Here are simple tips and techniques that you can discuss with your healthcare provider to relieve dyspnea.

Most Helpful

- **Immediate-release oral or IV opioids:** These agents can lower your body's respiratory drive, which can be one cause of shortness of breath, and provide fast-acting pain relief.

Likely to Be Helpful

- **Benzodiazepine:** Low doses of a benzodiazepine can treat symptoms of anxiety, which can contribute to shortness of breath. Small doses of benzodiazepines given when needed should not cause drug dependence. Sedation may occur at higher doses.
- **Air flow:** Increasing air flow with a fan or other device can improve symptoms of shortness of breath.
- **Psychosocial support:** Education can guide you to support groups or teach you coping mechanisms and how to manage your symptoms throughout the course of your illness.
- **Relaxation and stress reduction:** Relaxation therapy is a collective term for a number of techniques (including guided imagery) that are used to achieve progressive muscle relaxation. Relaxation therapy can reduce many cancer treatment-related side effects, including dyspnea.
- **Medications:** Some drugs, such as scopolamine, hyoscyamine, or atropine, can decrease the amount of secretions that your respiratory tract produces. Such secretions can contribute to feeling short of breath.
- **Discontinue fluid support:** Restriction of fluids can keep the body from being overloaded with fluids that it can't absorb or eliminate, which is one cause of dyspnea.
- **Temporary ventilator support:** Ventilator support is a way for a machine to take over the work of breathing for you. This may be done short-term for cases of acute respiratory distress that can be reversed.

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Not Enough Evidence

Although you may find that these techniques work for you, not enough studies have been done to show that they work to alleviate dyspnea.

- Extended-release morphine
- Midazolam plus morphine
- Nebulized or oral transmucosal fentanyl
- Nebulized furosemide
- Nebulized lignocaine (lidocaine hydrochloride)
- Nebulized opioids
- Palliative oxygen
- Nonpharmacologic interventions
 - Acupuncture
- Cognitive behavioral approach

Questions for Your Healthcare Provider

Always consult your healthcare provider before adding any new treatments or other interventions into your routine.