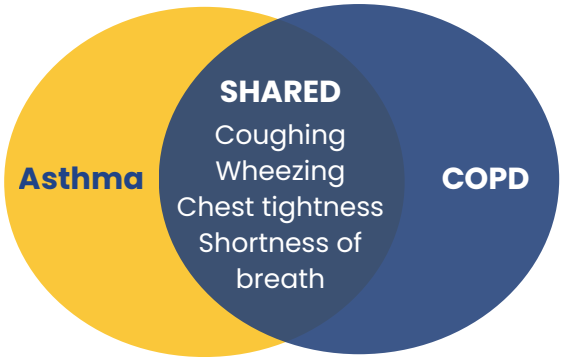
Asthma & COPD: Shared Airways, Shared Solutions

Asthma and chronic obstructive pulmonary disease, or COPD, affect millions of Americans. Although they are distinct conditions, they share symptoms and triggers and can be difficult to distinguish. Accurate diagnosis is essential to ensuring patients receive appropriate care.

Two Conditions, Different Characteristics

	Asthma	COPD
Typical Onset	Often begins in childhood but can develop at any age.	Usually develops in adulthood, often after age 40.
Symptoms	May come and go, with periods of worsening symptoms.	Often persistent and may worsen over time.
Airflow limitation	Often varies and may improve significantly with treatment.	Persistent airflow obstruction is a defining feature.
Smoking History	Doesn't cause asthma but can worsen symptoms.	Often is a cause for developing COPD.
Allergies	Often trigger symptoms.	Often do not trigger symptoms.

Where They Overlap



A person can have both asthma and COPD. This is called Asthma-COPD Overlap, or ACO, syndrome. Because symptoms and triggers overlap, distinguishing between the two is important for guiding appropriate care.

Accurate Diagnosis Matters

Spirometry measures how much air a person can exhale and how quickly. It is a key tool for diagnosing COPD and helps clinicians assess airflow obstruction in asthma. Without appropriate testing and clinical evaluation, patients may not receive the most appropriate treatment for their condition.

Policy Priorities

1. **Improve access to diagnostic testing** by supporting appropriate coverage and use of spirometry.
2. **Strengthen asthma and COPD programs** through sustained funding for prevention, education and disease management.
3. **Protect air quality** by maintaining strong standards that reduce harmful pollution.
4. **Limit workplace exposures** by strengthening protections against respiratory hazards on the job.

Shared Triggers, Shared Opportunities for Prevention

Smoke

Tobacco smoke and secondhand smoke can worsen respiratory symptoms and contribute to lung damage.

Poor air quality

Outdoor air pollution and wildfire smoke can trigger symptoms and exacerbate existing conditions.

Workplace exposures

Dust, fumes and chemicals can contribute to respiratory disease or worsen symptoms.

What You Can Do

- **Talk to your health care provider:** If you have a lasting cough, wheezing or shortness of breath, ask whether spirometry testing is right for you.
- **Follow your treatment plan:** Take medications as prescribed, learn proper inhaler technique and work with your provider on an action plan for managing flare-ups.
- **Avoid smoke of all kinds:** Quit tobacco, e-cigarettes or vaping and avoid secondhand smoke as much as you can. Free help is available at 1-800-QUIT-NOW.
- **Check the air quality:** Visit Allergy & Asthma Network to check local air quality, and limit outdoor activity on days with poor air or wildfire smoke.
- **Speak up:** Contact your elected officials and urge them to support the policy priorities above.
- **Become an advocate:** Join Allergy & Asthma Network's Patient Advocacy Leadership Initiative, or PALI, for advocacy training and more.
- **Join a research study:** Help find better treatments by taking a survey, joining a focus group, or enrolling in a clinical trial. Find current studies at AllergyAsthmaNetwork.org/research/find-a-study.

COPD ACTION ALLIANCE

Allergy & Asthma NETWORK