Physical activity has been firmly established as a key factor in our understanding of the course of chronic obstructive pulmonary disease (COPD). Many high-quality original studies have shown that higher levels of physical activity are associated with a lower risk of exacerbations, hospitalization, and death in COPD patients. It is therefore crucial to determine how to improve physical activity in patients with COPD. The first step is to understand the relationship between capacity and activity. In general terms, capacity is defined as what the subject is capable of, while activity is what they actually do. In a healthy population with normal exercise capacity, physical activity levels range from zero to very intensive, depending on the choice of the individual. This range of activity levels is narrower in COPD patients because of reduced exercise capacity due to the disease. Consequently, we propose a dual strategy for improving physical activity in COPD patients: 1) increasing and maintaining exercise capacity with pharmacological treatment, pulmonary rehabilitation, and other strategies; and 2) increasing and maintaining physical activity with interventions aimed at changing behavior. Research on the latter is still limited. Some of the more recent interventions, particularly those incorporating motivational techniques and positive reinforcement, have managed to increase levels of physical activity, but only in the short term. Some data suggest that if effects are to be maintained in the long-term, the social and environmental setting of the patients must be taken into consideration. Various studies currently underway will determine whether this hypothesis is true.

References