OwieClear COPD Page Accuracy Review

Page: https://owieclear.com/conditions/copd-chronic-lung-disease/
Reviewed: November 17, 2026

Overall assessment

This is a **mostly strong page with one critical error**. Smoking as main cause, emphysema + chronic bronchitis framing, spirometry diagnosis, smoking cessation, inhalers, pulmonary rehab, vaccines, and flare-up guidance are accurate. **Must fix:** the “Does it spread?” section incorrectly states COPD spreads person-to-person via coughs/sneezes — it does not. COPD is not contagious.

Critical error

“Does it spread or run in families?” currently says: “Yes, it can spread from person to person. How it spreads: coughs or sneezes…”

This is **wrong**. COPD is not an infectious disease. It does not spread by coughs, sneezes, or any person-to-person route. The section appears to have been contaminated by an infectious-disease template. Replace with: not contagious; alpha-1 antitrypsin deficiency is genetic and can run in families; smoking remains the dominant cause.

What’s currently listed (symptoms)

Common

• Dyspnea on exertion · Chronic productive cough · Wheeze · Chest tightness · Smoking/vaping history

Less common

• Frequent infections · Fatigue · Weight loss / muscle weakness (severe) · Ankle swelling

Accuracy of symptoms

Item	Verdict	Notes
Exertional dyspnea + chronic productive cough	Accurate	Core COPD presentation
Wheeze / chest tightness	Accurate	Common; overlap with asthma
Frequent chest infections	Appropriate	Exacerbation pattern
Ankle swelling	Appropriate as less common	Can signal cor pulmonale / right heart strain
Weight loss (severe)	Appropriate	Advanced disease / systemic effects

Strengths

• Smoking as main cause; quit smoking as best disease-modifying step
• Emphysema + chronic bronchitis explained simply
• Spirometry as key diagnostic test
• Alpha-1 antitrypsin deficiency included
• Flare-up recognition (more dyspnea, more/changed mucus) + action plan
• Inhaler classes: rescue, long-acting, inhaled steroids with thrush caution
• Pulmonary rehab, oxygen, vaccines (flu, COVID, pneumococcal, RSV)
• Comparison table vs asthma is useful

- Complications: pneumonia, right heart strain, lung cancer risk, respiratory failure

Other gaps / polish

1. “Back to school/work” block

Current text is infection-isolation guidance (“stay home until no fever… wear a mask”). That fits acute respiratory infection pages, not chronic COPD. Replace with return-to-activity / work accommodation language appropriate for a chronic lung disease.

2. GOLD-style severity (optional)

Optional one-liner that spirometry and symptom/exacerbation history guide stage and treatment intensity.

3. Triple therapy / dual bronchodilators

Medicine list includes modern combinations — good. High-level “long-acting inhalers” is fine for consumers.

4. Vaping

Listed as a history clue. Evidence on vaping as a COPD cause is still evolving; smoking remains dominant. Fine to list under exposures.

Suggested “Does it spread?” rewrite

- COPD is not contagious. You cannot catch it from someone else.
- A rare genetic condition (alpha-1 antitrypsin deficiency) can run in families and cause COPD, sometimes at a younger age.
- Smoking and inhaled irritants are the main causes for most people.

Bottom line

Area	Rating
Smoking as main cause / cessation	Accurate
Core symptoms	Accurate
Spirometry diagnosis	Accurate
Treatment (inhalers, rehab, vaccines, O2)	Accurate
“Does it spread?” section	**Incorrect — must fix**
Back to school/work block	**Wrong template (infection)**
Alpha-1 mention	Good
Flare-up / emergency guidance	Strong

Overall: Clinically solid on causes, symptoms, diagnosis, and treatment. **Priority fix:** remove the false claim that COPD spreads by coughs/sneezes and rewrite the contagion/genetics section. Second: replace the infection-style return-to-work block with chronic-disease appropriate language.

Review based on page content as of November 17, 2026, cross-checked against standard COPD clinical guidance (GOLD-style principles).