

# Shortness of breath

Section 1 of 6: What is shortness of breath?

Understand breathlessness, possible heart and lung causes, warning signs, testing, and treatment.

## What should I do now?

### Call 911

Call 911 for new or unexplained chest pressure that persists or returns, severe trouble breathing, collapse without normal recovery, or sudden face/arm weakness or trouble speaking. Do not drive yourself.

### Contact your care team

Contact your care team promptly for increasing breathlessness, reduced activity, or needing more pillows at night.

### Keep your care plan

Track changes and follow your medication and activity plan.

#### SECTION 1

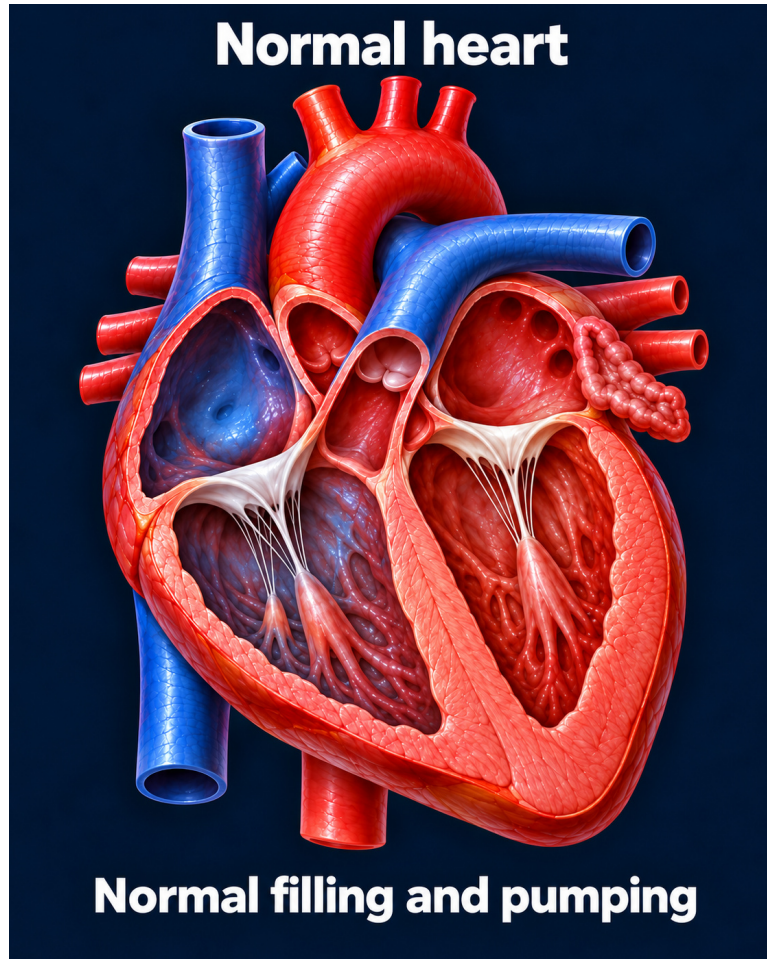
## What is shortness of breath?

Shortness of breath means that breathing feels harder than usual. You may feel unable to get enough air, need to take deeper breaths, or have to stop an activity to catch your breath. Doctors call this dyspnea.

Breathing harder during vigorous exercise can be normal. Becoming breathless with your usual activities, while resting, or without a clear explanation deserves medical attention.

## Your heart and lungs work together

Your lungs bring oxygen into your blood. Your heart pumps that blood to the rest of your body. A problem with either organ - or with the blood carrying oxygen - can make you feel short of breath.



A normal heart fills between beats and pumps blood forward. Breathing depends on both heart and lung function.

## The pattern matters

Symptoms may start suddenly or develop gradually. Tell your clinician if breathing is harder during walking, when lying flat, or at night. Shortness of breath is a symptom, not a diagnosis.

Sources: Cleveland Clinic: Dyspnea · NHLBI: Heart failure symptoms

# Shortness of breath

Section 2 of 6: Possible causes

Understand breathlessness, possible heart and lung causes, warning signs, testing, and treatment.

## SECTION 2

# What can cause shortness of breath?

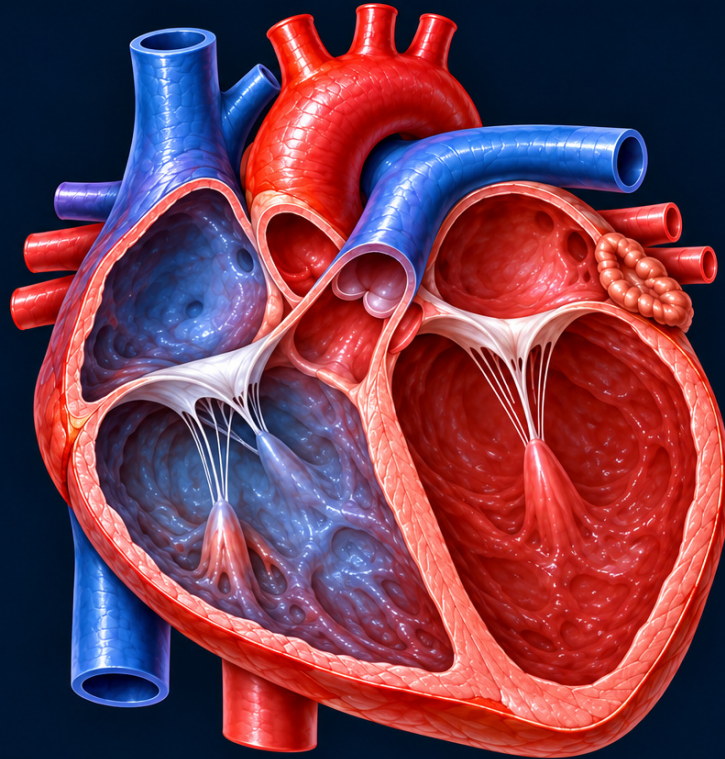
## Heart failure: difficulty pumping or filling

Heart failure can raise pressure in the blood vessels of the lungs and cause fluid buildup, making breathing harder. It can occur with a weak squeeze or with a heart that has trouble relaxing and filling.

## Heart failure with reduced ejection fraction

The heart pumps out a smaller proportion of blood with each beat. The ventricle may become enlarged.

## Heart failure with reduced EF



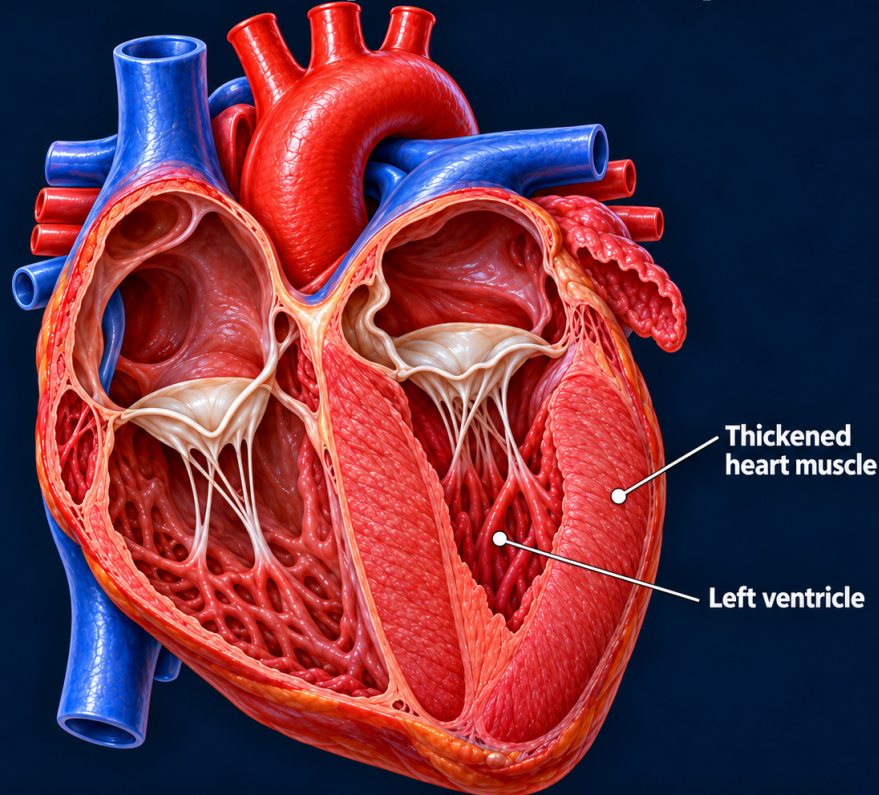
**Enlarged ventricles • Weaker pumping**

One example of reduced-EF heart failure. Not every patient has enlarged ventricles.

## Heart failure with preserved ejection fraction (HFpEF)

The squeeze may appear preserved, but filling pressures can still be too high. A normal EF does not rule out heart failure.

## Heart failure with preserved EF (HFpEF)



**Preserved squeezing strength • Difficulty relaxing and filling**

One example of HFpEF; not every patient has thickened heart muscle.

Thickened muscle is one possible finding in HFpEF. Not every patient has this appearance.

## Other heart causes

- Coronary artery disease: Reduced blood supply may cause breathlessness, sometimes without chest pain.
- Valve disease: A severely narrowed or leaking valve can affect forward blood flow and pressure in the lungs.
- Abnormal rhythms: A fast, irregular, or very slow heartbeat can cause breathlessness.

## Lung and other causes

Asthma, COPD, pneumonia, lung scarring, a blood clot in the lungs, or a collapsed lung can cause breathing trouble. Anemia, excess weight, reduced fitness, and anxiety can also contribute.

More than one cause may be present. New symptoms should not automatically be attributed to age, anxiety, or being out of shape.

Sources: [NHLBI: Heart failure](#) · [NHLBI: Coronary disease symptoms](#) · [Mayo Clinic: Causes](#)

# Shortness of breath

Section 3 of 6: When to seek help

Understand breathlessness, possible heart and lung causes, warning signs, testing, and treatment.

## SECTION 3

### When should I seek help?

Call 911 for sudden, severe breathing difficulty or breathlessness with chest discomfort, fainting, confusion, or blue or gray lips.

Do not drive yourself.

Severe difficulty speaking because you cannot catch your breath also requires emergency help.

### Get urgent assessment for a new, concerning change

New breathlessness after surgery, prolonged bed rest, or a long journey may signal a blood clot in the lungs. Coughing up blood or new swelling in one leg makes urgent assessment especially important.

### Contact your clinician promptly

- Your usual walking or daily activities are becoming harder.
- You need more pillows to breathe comfortably or wake up gasping.
- You develop swelling in the feet, ankles, or abdomen.
- Your weight rises quickly, especially with known heart failure.
- You have fever, cough, wheezing, or worsening ongoing breathlessness.

Use emergency care if symptoms become severe. Do not wait for a routine appointment when breathing is getting worse.

Sources: [Mayo Clinic: When to seek care](#) · [NHLBI: Changes to report](#)

# Shortness of breath

## Section 4 of 6: Evaluation

Understand breathlessness, possible heart and lung causes, warning signs, testing, and treatment.

### SECTION 4

## How is shortness of breath evaluated?

Your clinician asks about your symptoms, examines your heart and lungs, and checks vital signs, including oxygen level. Testing depends on the suspected cause; you do not need every test listed here.

### 1. An EKG

An EKG records the heart's electrical activity and can identify rhythm problems or clues to heart injury.



An EKG records a brief snapshot of your heart's electrical activity.

## 2. An echocardiogram

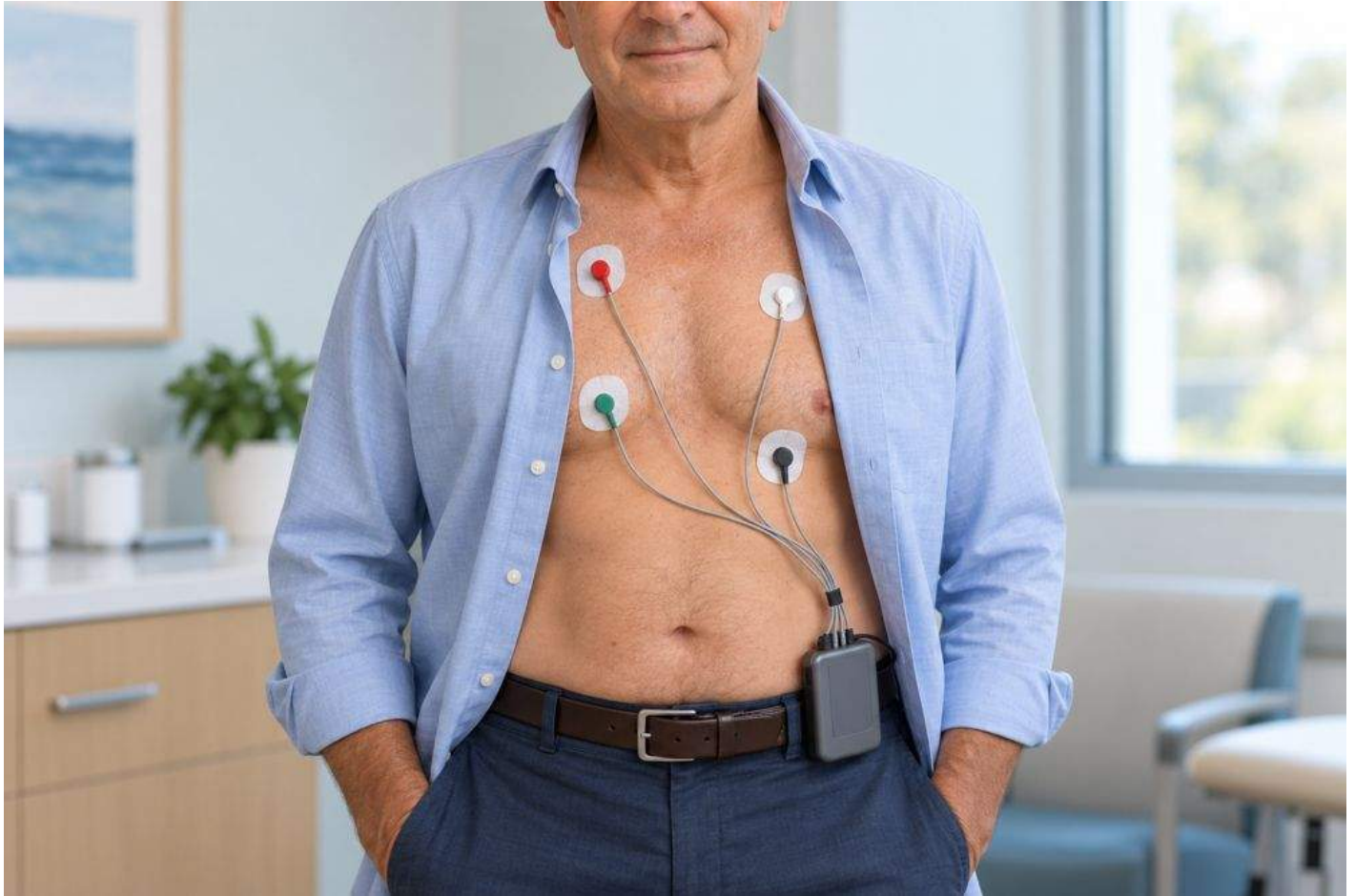
An echo uses ultrasound to assess pumping strength, valves, and clues to abnormal filling pressures. Your doctor considers more than the EF alone.



Ultrasound helps your clinician evaluate heart structure and function.

### **3. A heart rhythm monitor**

If symptoms come and go or suggest an abnormal rhythm, a Holter or other wearable monitor may record your heartbeat during daily activities.



A monitor may help connect episodes of breathlessness with changes in heart rhythm.

## **4. Blood tests and lung testing**

Blood tests may check for anemia, kidney problems, or heart strain. BNP or NT-proBNP can help assess possible heart failure, but must be interpreted with other findings. A chest X-ray, breathing tests, or selected CT scans may assess lung problems.

## **5. Additional testing when needed**

A stress test or coronary evaluation may be appropriate if reduced heart blood flow is suspected. Persistent unexplained symptoms sometimes require more specialized testing.

Sources: NHLBI: Heart testing · Cleveland Clinic: Evaluation

# Shortness of breath

Section 5 of 6: Treatment

Understand breathlessness, possible heart and lung causes, warning signs, testing, and treatment.

## SECTION 5

### How is shortness of breath treated?

Treatment targets the cause. There is no single medicine that treats every type of breathlessness.

#### Heart failure and excess fluid

Diuretics, often called “water pills,” help the body remove extra salt and fluid. Other heart failure medicines help protect the heart and improve outcomes. Treatment depends on the type of heart failure, kidney function, blood pressure, and other conditions.

Some patients benefit from a procedure or a device such as a resynchronization pacemaker. These options are chosen for specific heart findings, not breathlessness alone.

#### Coronary artery, valve, or rhythm problems

Treatment may involve medicines, restoring or controlling the heart rhythm, treating a significant valve problem, or improving coronary blood flow when indicated. Your cardiologist will explain which approach fits your diagnosis.

## **Lung disease or other causes**

Asthma or COPD may require inhalers. Other treatment may address an infection, anemia, or another identified condition. Oxygen is prescribed when medically indicated; it is not needed for every patient who feels breathless.

## **Habits and rehabilitation**

Avoid smoking and follow your prescribed plan. Once it is safe, gradual activity or a supervised rehabilitation program may improve stamina. Your clinician may recommend weight management or a personalized salt and fluid plan.

Do not change diuretic doses or restrict fluids on your own unless your care team has given you a specific plan.

Sources: [NHLBI: Heart failure treatment](#) · [Cleveland Clinic: Treatment](#)

# Shortness of breath

Section 6 of 6: Your appointment

Understand breathlessness, possible heart and lung causes, warning signs, testing, and treatment.

## SECTION 6

# Preparing for your appointment

## Describe what has changed

- When did symptoms start: suddenly or gradually?
- How far can you walk now compared with before?
- Does breathlessness occur at rest, when lying flat, or during sleep?
- Do you also have swelling, weight changes, chest discomfort, palpitations, cough, or wheezing?

## Bring your medicines and records

Bring a medication list with doses, supplements, and allergies. Include recent hospital records and previous heart or lung test results. If you already track weight, blood pressure, pulse, or oxygen levels, bring those readings too.

## Questions to ask

- Is the cause related to my heart, lungs, or something else?
- Which tests are needed?
- What should each treatment improve?
- What activity is safe?
- Which changes should prompt a call or emergency care?

- When should I follow up?

If you have heart failure, ask how often to weigh yourself and which weight or symptom changes to report. Make sure you know whom to contact if symptoms worsen or medicines cause problems.

Do not delay emergency care to collect readings or prepare for an appointment.

Sources: [NHLBI: Appointment preparation](#) · [NHLBI: Your care plan](#)

## Sources & further reading

[Cleveland Clinic: Shortness of breath](#)

[Mayo Clinic: Causes and warning signs](#)

[NIH: Heart failure diagnosis](#)

[NIH: Heart failure treatment](#)

Updated October 2026. Educational information; your own care plan may differ. Medical illustrations are simplified examples for teaching.