The state of COPD in Mexico

- **2.7 million people** living with COPD: around 1.3 million men and 1.4 million women[1¥]
- **Eighth leading cause of death**[2¥]
- **Direct hospital costs: USD $5,775** per person per year for people living with severe COPD[3*]
- **1 in 4 people** experiences a severe flare-up every year.[4†]

*2013–22 data †2021–22 data ¥2023 data

COPD is a highly debilitating and often fatal lung disease[5]

Chronic obstructive pulmonary disease (COPD), which includes emphysema and chronic bronchitis, deteriorates people's lung function – restricting airflow, making it increasingly difficult to breathe and potentially affecting every facet of a person's life.[5] The severity of the disease increases as it progresses; people with COPD can experience flare-ups (exacerbations) that, when severe, require emergency hospital admission.[5] People with COPD are also at increased risk of heart disease, as airflow obstruction and systemic inflammation linked to COPD can impair cardiac function.[5] However, appropriate care can improve lung health and quality of life.[5]

Challenges

Facilitating access to care

Poor awareness of COPD and national guidelines, restricted access to and expertise in spirometry, and limited availability of medications impede the implementation of recommended best practice care, often requiring pulmonologists to provide suboptimal treatments.[6-11]

Identifying it early

Over half of people living with COPD are only diagnosed after a flare-up at an advanced stage and with cardiovascular comorbidities, increasing their risk of poor health and irreversible decline in lung function.[7 10 11]

Facilitating access to care

Gaps in healthcare resources and infrastructure restrict patient access to essential services, including pulmonary rehabilitation, vaccinations, smoking cessation support and inhaler training.[7 9-12]

'We need support to acknowledge COPD as a public health concern and provide people with consistent access to a comprehensive approach that enables early diagnosis and helps people live longer, healthier and fuller lives.'

– Dr Jesús J Vázquez Cortés,
consultant pulmonologist and former Head of the
COPD Section of the Mexican Society of Thoracic Pulmonology

Living with COPD: Francisco's story

Francisco developed COPD following a severe case of COVID-19. He describes his symptoms as a sensation of 'missing air'. Having private health insurance, he accessed specialist care quickly, started daily medication and regained normal quality of life and functioning. Francisco realises that many people in Mexico face delays in diagnosis and care, often due to insufficient insurance coverage. He advocates for greater public awareness of COPD, better air quality, earlier detection and equitable healthcare.

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How is COPD being prioritised?

National policies

Overall status: **moderate**

Chronic respiratory diseases are a recognised public health challenge in the Health Sector Program 2025–2030.[13] However, COPD is not specifically mentioned and does not have dedicated funding.[13]

Clinical guidance

Overall status: **moderate**

The Mexican Respiratory Society has developed national COPD guidelines, which were updated in 2025. A new discharge guideline for COPD flare-ups was added in 2024.[14 15] However, more support is needed for implementation.[10]

Data collection

Overall status: **poor**

There is no national registry for COPD, and data are not collected in Mexico's National Health Survey System.[10 11]

Case study

Mexico is working to tackle the risk that indoor air pollution poses to respiratory health.[16 17] Between 2013 and 2019, the Tobacco and COPD Research Department of the National Institute of Respiratory Diseases conducted respiratory health campaigns in Oaxaca for rural women over 40 from the Zapotec indigenous group. The prevalence of COPD was 11.6% – almost double that of women in Mexico City. This was largely due to prolonged exposure to wood smoke while cooking in poorly ventilated spaces. Six years later, the government launched the National Program for Efficient Wood-Burning Stoves for Well-being to replace traditional wood-burning stoves in rural homes with 1 million ecological, efficient models.

Policymakers must take action to:

develop a national COPD-focused chronic respiratory disease strategy that formalises early detection and diagnosis pathways, and strengthens care coordination through effective referral systems that align with the Health Sector Program 2025-2030

allocate funding for COPD under national strategies to improve access to diagnostics such as spirometry, timely care and treatment, including inhaler training, rehabilitation, vaccinations and smoking cessation

support the implementation of national guidelines and international GOLD recommendations to promote early and accurate diagnosis, reduce the risk of disease progression and cardiopulmonary decline, and ensure equitable access to high-quality care that reduces the risk of flare-ups and avoidable hospitalisations.

Contributors

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Dr Jesús J Vázquez Cortés, consultant pulmonologist and former Head of the COPD Section of the Mexican Society of Thoracic Pulmonology; **Dr Alejandra Ramírez Venegas**, consultant pulmonologist and former research member at the Instituto Nacional de Enfermedades Respiratorias; and **Francisco Freyria**, a person living with COPD.

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