



COPD Essentials

Overall Goals

- ▶ Provide an overview of all parts of good COPD management
- ▶ To help you feel more confident in your ability to actively manage your condition and cope with related challenges





What you will learn from this session

- ▶ What COPD is and how is it diagnosed
- ▶ What role stopping tobacco use has
- ▶ What medications are used and why
- ▶ What are Flare-ups and how to manage them
- ▶ Lifestyle changes – Exercise/Nutrition
- ▶ How to deal with anxiety and stress
- ▶ Why is goal setting so important
- ▶ What resources and tools are available and where you can find them



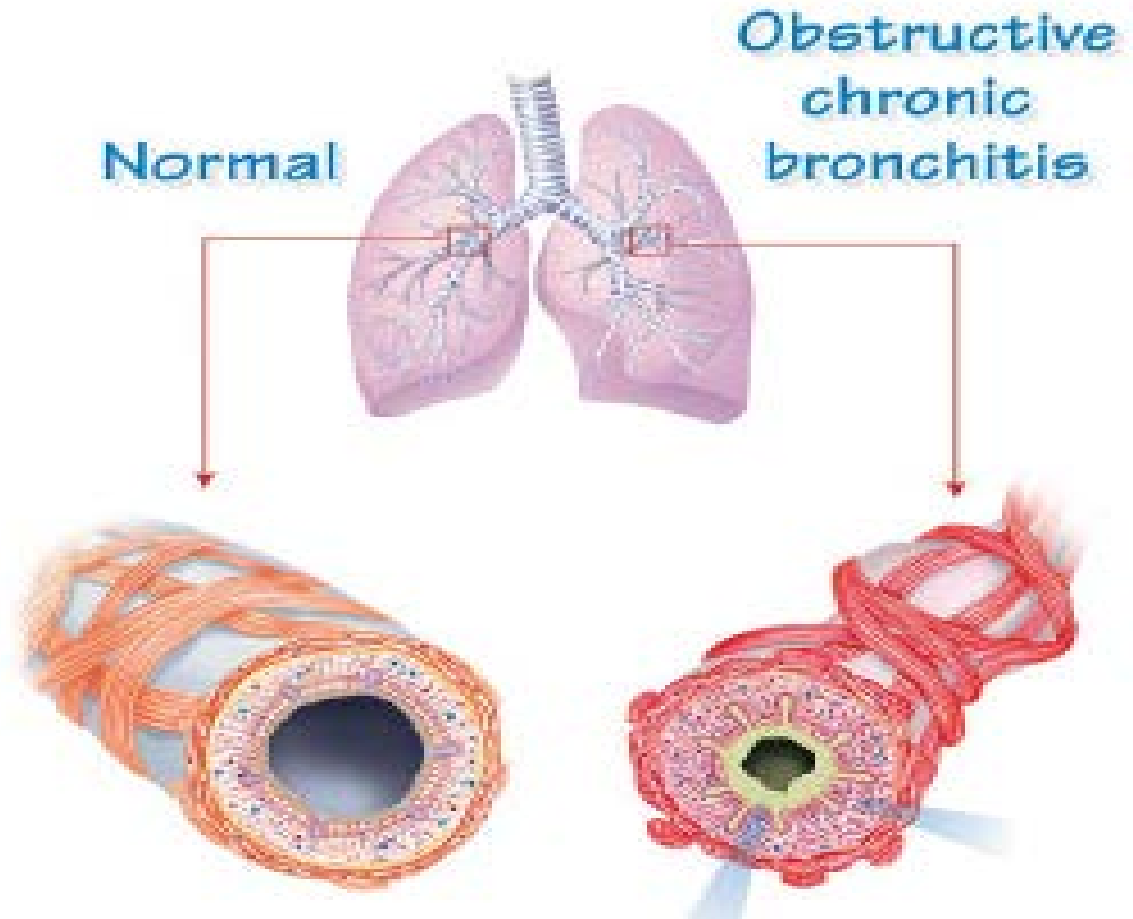
What is COPD?

- ▶ COPD stands for **Chronic Obstructive Pulmonary Disease**.
- ▶ COPD is a long-term lung disease and will continue to get worse over time.
- ▶ COPD damages your airways and makes it hard to move air in and out of your lungs.
- ▶ COPD is treatable (not curable) at any stage of the disease, but earlier treatment is best
- ▶ COPD includes **chronic bronchitis** and **emphysema**. Many people with COPD have both chronic bronchitis and emphysema.

The Lung Association: www.lungs.ca

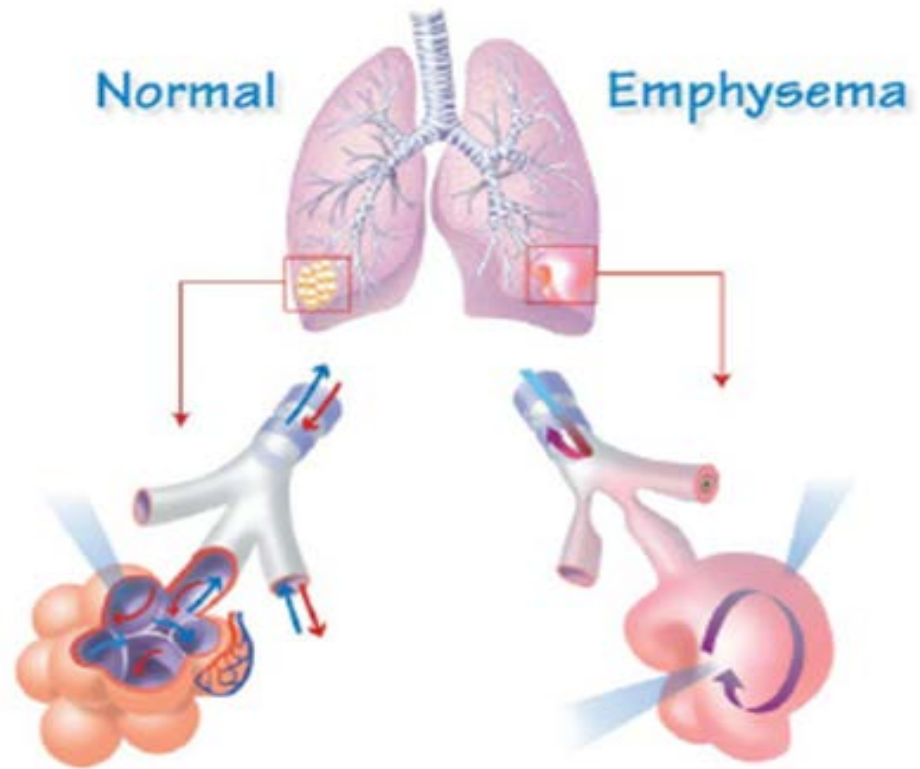
Chronic bronchitis

Chronic bronchitis makes your airways swollen and partially blocked by mucus.



Emphysema

Emphysema damages the lung tissue where we exchange carbon dioxide for oxygen.



What causes COPD?

In countries like Canada, smoking causes about 80–90% of COPD cases.

Other things that can cause COPD are:

- ▶ Second hand smoke
- ▶ Air pollution (Dust, occupational chemicals etc)
- ▶ Having repeated lung infections as a child
- ▶ A genetic condition called alpha-1 antitrypsin deficiency

Canadian Lung Association:
www.lung.ca





30 Second COPD test

Smokers or ex-smokers more than 40 years old who answer yes to any one of the following questions:

1. Do you cough regularly?
2. Do you cough up phlegm regularly?
3. Do even simple chores make you short of breath?
4. Do you wheeze when you exert yourself or at night?
5. Do you get frequent colds that persist longer than those of other people?

SPIROMETRY TEST RECOMMENDED!

***Please ask your doctor for a lung test**



COPD can be Managed

It is possible to live well with COPD by taking a number of steps to proactively manage the condition through:

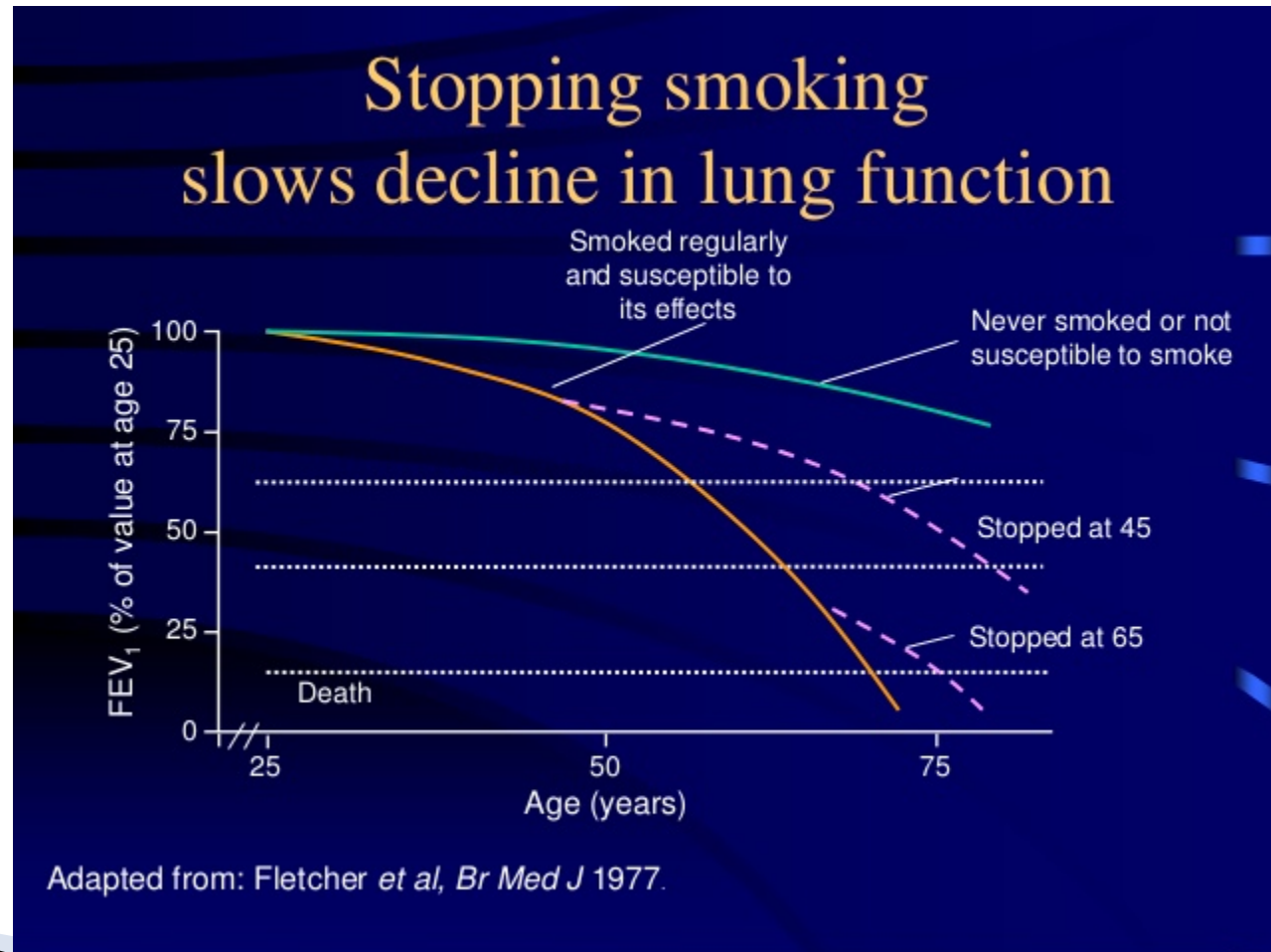
- Stopping smoking
- Being on the right medications for you
- Early *recognition, treatment, & prevention* of flare-ups
- Keeping your body strong through exercise and healthy eating
- Managing stress and anxiety
- Setting reasonable goals



WRHA Pulmonary Rehab Program
Photo Consent Obtained 2012

It's never too late to stop

If you smoke, stopping smoking and avoiding second hand smoke is the best way to reduce the rate of decline in lung function.





Interested in Stopping/Reducing?

- ▶ Talk to your healthcare professionals
- ▶ Access assistance programs – online or in-person: support groups or Smoker’s Helpline
- ▶ The use of medication approximately doubles smoking cessation rates.* Most people cannot sustain ‘cold turkey’. This is normal!
- ▶ Most successful approach is using medications with behavior change help
- ▶ Never quit quitting. Stopping tobacco often takes multiple attempts

*O’Donnell et al. CTS COPD update: Highlights for primary care. Can Respir J Vol 15 Suppl A. 2008

COPD Care and Medications:

Medications can help with symptoms, possibly improve lung function and increase quality of life

But only if taken properly and as prescribed



If you have any questions speak to your Health Care Provider



Benefits of Medications

- ▶ Manage shortness of breath
- ▶ Improve health status
- ▶ Increase exercise tolerance
- ▶ Decrease ‘flare-ups’

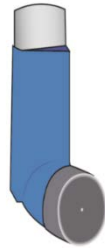
Same diagnosis DOES NOT mean same medications in all patients.

It is important to take meds as prescribed.

If not working as usual, talk to a health care provider

Respiratory Medication Devices

Canadian Lung Association – patient instruction videos



Metered
Dose
Inhaler®



Diskus®



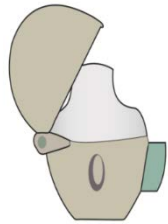
Turbuhaler®



Respimat®



Ellipta®



HandiHaler®



Twisthaler®



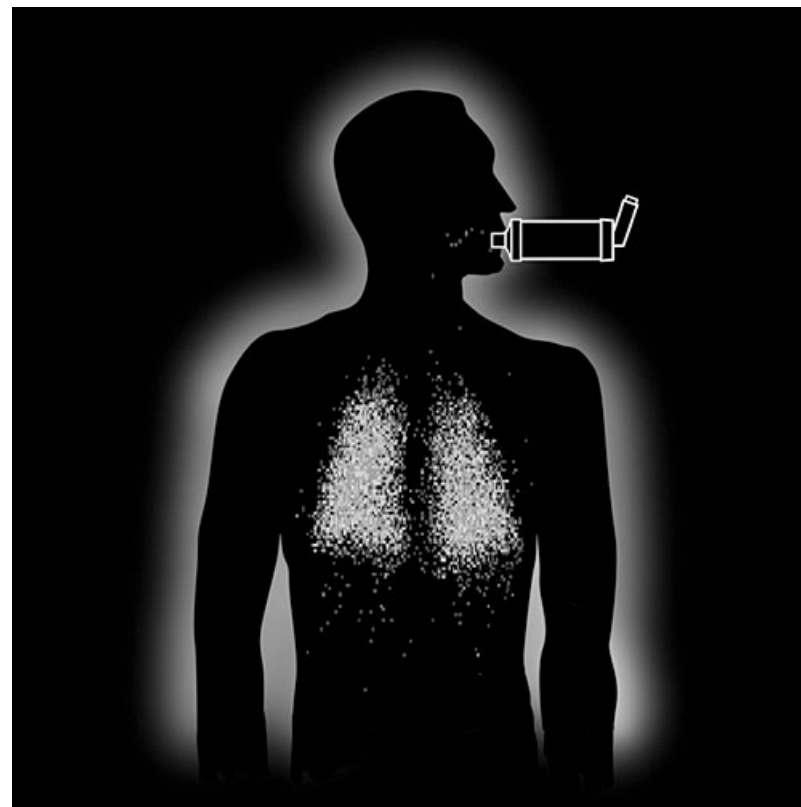
Genuair®



Breezhaler®



Delivery of Medications With and Without Spacers



Plaza V, Sanchis J, CESEA Group, *Medical Personnel and Patient Skill in the use of Metered Dose Inhalers: A Multicentric Study*. Respiration 1998; 65:195-198.

Recommended for all asthma/COPD patients!

Canadian Thoracic Society guidelines



Avoid Flare-ups

- ▶ Stay informed and educated about your condition
- ▶ Monitor your symptoms and changes
- ▶ Take your medications as prescribed
- ▶ Avoid triggers
- ▶ Have an action plan and know how to use it



For more information on the COPD ACTION PLAN Ask your Doctor

My COPD Action Plan _____ Date _____
Patient's Copy (Patient's Name) Canadian Respiratory Guidelines COPD Treatable. Preventable.

This is to tell me how I will take care of myself when I have a COPD flare-up.

My goals are _____

My support contacts are _____ and _____
(Name & Phone Number) (Name & Phone Number)

My Symptoms	I Feel Well	I Feel Worse	I Feel Much Worse
I have sputum.	My usual sputum colour is: _____	Changes in my sputum, for at least 2 days. Yes <input type="checkbox"/> No <input type="checkbox"/>	My symptoms are not better after taking my flare-up medicine for 48 hours.
I feel short of breath.	When I do this: _____	More short of breath than usual for at least 2 days. Yes <input type="checkbox"/> No <input type="checkbox"/>	I am very short of breath, nervous, confused and/or drowsy, and/or I have chest pain.
My Actions	Stay Well I use my daily puffers as directed.	Take Action If I checked 'Yes' to one or both of the above, I use my prescriptions for COPD flare-ups.	Call For Help I will call my support contact and/or see my doctor and/or go to the nearest emergency department.
	If I am on oxygen, I use _____ L/min.	I use my daily puffers as usual. If I am more short of breath than usual, I will take _____ puffs of _____ up to a maximum of _____ times per day.	I will dial 911.
Notes:	I use my breathing and relaxation methods as taught to me. I pace myself to save energy.		Important information: I will tell my doctor, respiratory educator, or case manager within 2 days if I had to use any of my flare-up prescriptions. I will also make follow-up appointments to review my COPD Action Plan twice a year.
	If I am on oxygen, I will increase it from _____ L/min to _____ L/min.		

My COPD Action Plan _____ Date _____
Patient's Copy (Patient's Name) Canadian Respiratory Guidelines COPD Treatable. Preventable.

This is to tell me how I will take care of myself when I have a COPD flare-up.

My goals are _____

My support contacts are _____ and _____
(Name & Phone Number) (Name & Phone Number)

Prescriptions for COPD flare-up (Patient to take to pharmacist as needed for symptoms)

These prescriptions may be refilled two times each, as needed, for 1 year, to treat COPD flare-ups. Pharmacists may fax the doctor's office once any part of this prescription has been filled.

Patient's Name Patient Identifier (e.g. DOB, PHN)

1. (A) If the colour of your sputum **CHANGES**, start antibiotic _____ Dose: _____ #pills: _____
How often _____ for #days: _____

(B) If the first antibiotic was taken for a flare-up in the last 3 months, use this different antibiotic instead:
Start antibiotic _____ Dose: _____ #pills: _____
How often _____ for #days: _____

AND / OR

2. If you are **MORE short of breath** than usual, start prednisone _____ Dose: _____ #pills: _____
How often: _____ for #days: _____

Once I start any of these medicines, I will tell my doctor, respiratory educator, or case manager within 2 days.

Doctor's Name Doctor's Fax Doctor's Signature

License Date



Air Quality Health Index

- ▶ The outdoor air pollution can vary with location and time, and is updated on weather station websites
- ▶ Poor air quality can trigger lung attacks
- ▶ For more information on the Air Quality Health Index please contact MB Lung



Immunizations – Benefits

- ▶ Any basic illness can develop into a lung infection... Immunizations protect us from many preventable illnesses
- ▶ Lung infection (pneumonia) causes permanent damage that cannot be completely repaired
- ▶ Influenza (flu shot) and pneumococcal vaccines help prevent some very common illnesses
- ▶ Some immunizations are for deadly diseases... These are also important to keep up to date
- ▶ Speak with your doctor or healthcare provider about getting immunized



Coping with Change

Coping with a chronic illness can be difficult.

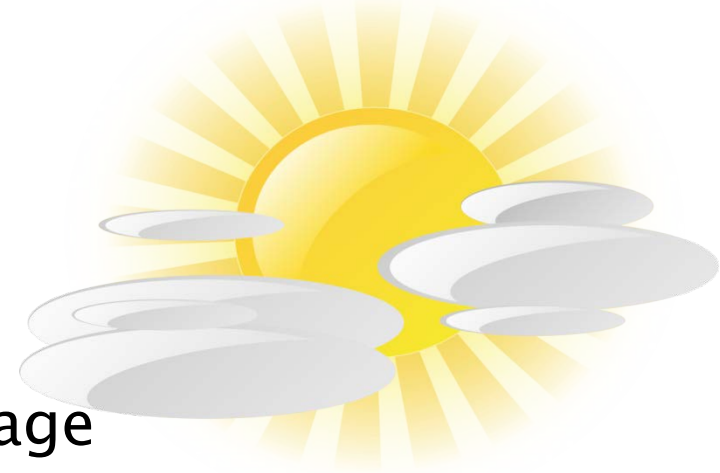
Anxiety is common in people diagnosed with COPD. When you are struggling, make sure to reach out:

- Talk to your healthcare provider
- Contact Anxiety Disorders Association of Manitoba (ADAM) or Manitoba Lung Association (MLA)
- Find supports in the Mental Health Resource Guide
- Get Better Together – A program for living better with ongoing health conditions



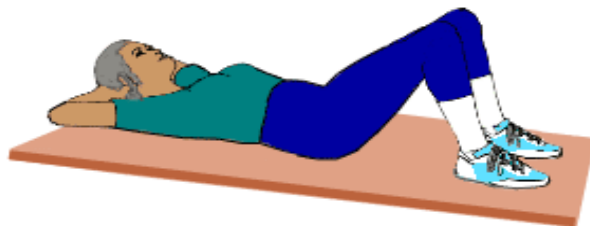
Coping with Stress & Anxiety:

- Learn relaxation techniques
- Spend time with positive others
- Remember a mantra / positive message
- Take the Get Better Together program (online or in-person)
- Avoid excess alcohol and drug/medication use; talk to your doctor if this is a challenge



Benefits of Exercise

- ▶ Decreases shortness of breath and fatigue
- ▶ Improves ability to perform daily tasks
- ▶ Improves muscle endurance and strength
- ▶ Helps keep airways clear of mucus
- ▶ Reduces frequency and severity of lung attacks
- ▶ Improves overall health and quality of life



Source: Canadian Thoracic Society guideline: Optimizing pulmonary rehabilitation in COPD. 2010.



The Cycle of Deconditioning





Group Brainstorm

- 1) Brainstorm:
 - What problems do you have getting exercise?

- 2) Pick 1 problem to problem-solve

- 3) Problem-solve:
 - What could you do when you encounter this problem?



Problem-solving steps

- 1) Identify the problem
- 2) List ideas to solve the problem
- 3) Select one method to try
- 4) Check the results
- 5) Pick another idea if the first didn't work
- 6) Use other resources
- 7) Accept that the problem may not be solvable now

Source: Lorig, Holman, and Sobel et al. *Living A Healthy Life with Chronic Conditions*, Canadian 4th Ed, 2013



Things to Keep in Mind:

A **small** amount of activity is **better**
than none at all

Always remember to *breathe*

Exercise IS Medicine and can be fun



Healthy Nutrition



Overall Healthy Eating



Pulmonary Rehabilitation

- ▶ An 8 week program with a focus on **exercise and education**
- ▶ Ask your Doctor for a referral to 1 of the 3 locations around the city:
 - Misericordia Health Centre
 - Seven Oaks/Wellness Institute
 - Deer Lodge Centre
- ▶ Proven to improve health-related quality of life, and reduce number of hospitalizations and days in hospital, perceived intensity of breathlessness, and depression and anxiety associated with COPD.

Source: American College of Chest Physicians, Joint AACP/AACPR statement on Pulmonary Rehab, 2007.



Goal setting

- ▶ Change takes time and effort
- ▶ You may have many things you would like to change, but you may only be able to make one change at a time, and that is OK
- ▶ Take action in small steps, one step at a time



Action Plan for Change

1. Something YOU want to do
2. Achievable (something you can expect to accomplish this week)
3. Action-specific
4. Answers the questions:
 - What
 - How much
 - When
 - How often
5. Confidence level of 7 or more
(you are sure that you will complete your entire plan at a level of 7 or higher on a scale from 0 = not at all sure to 10 = absolutely sure)

Source: Lorig, Holman, and Sobel et al. *Living A Healthy Life with Chronic Conditions*, Canadian 4th Ed, 2013

Summary

- ▶ COPD cannot be cured but can be treated and symptoms can be managed at any stage of the disease
- ▶ The best way to slow the rate of lung function decline is to STOP smoking
- ▶ Medications, action plans and exercise can help reduce lung attacks and improve quality of life
- ▶ Better knowledge and understanding = better self-care and management

Living well with COPD is possible



Thank you



Questions?

Acknowledgements

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