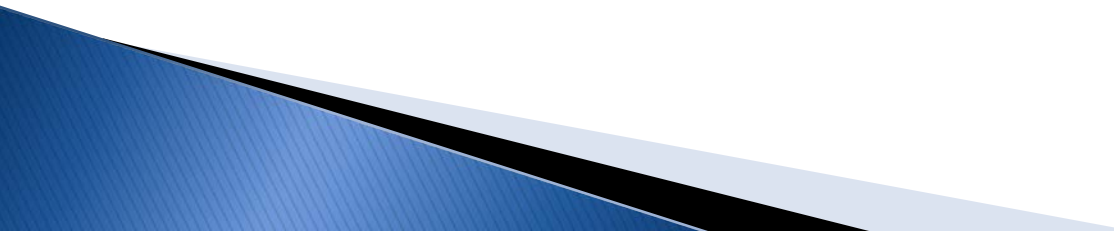
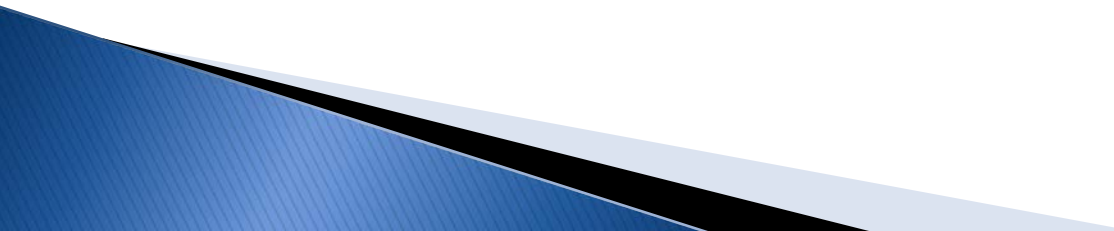


COPD Medications

What you will learn from this session

- ▶ Benefits of medications
 - ▶ The different types of COPD medications, what they do and when to use them
 - ▶ How to take your medications properly
 - ▶ What a COPD Action Plan is and how to request one
- 

Key Messages:

- ▶ COPD is manageable at any stage of your diagnosis
 - ▶ Medications are important in managing COPD
 - ▶ Medications cannot cure COPD, but they can improve your symptoms
 - ▶ Medications are only beneficial if taken properly
- 

Benefits of Medications

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



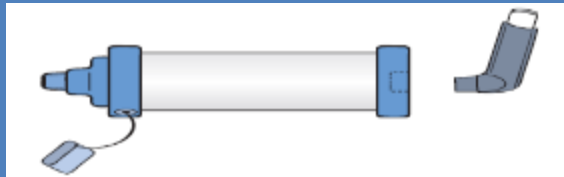
Bronchodilator Medications:



- ▶ Open our airways
- ▶ Treat shortness of breath
- ▶ Types: Inhaled, Oral and Liquid medications
- ▶ Many different types of medications used to manage lung diseases → your doctor and healthcare team will decide what is best for you
- ▶ **Take medications as prescribed**
- ▶ If not working as usual, or side effects become bothersome, talk to your doctor or pharmacist

Inhaled Bronchodilators:

- 1) Short and **Fast** Acting:
- Ventolin (salbutamol)
 - Bricanyl (terbutaline)



- 2) Short-Acting:
- Atrovent (ipratropium)



- 3) Short-Acting Combination:
- Combivent (ipratropium and salbutamol)



- 4) Long-Acting:
- Many types



1) Reliever/Rescue Medications

Ventolin (salbutamol)

Bricanyl (terbutaline)

- ▶ Used when you feel short of breath and need relief **fast**
- ▶ Fast-Acting: start to feel relief within 5–10 minutes
- ▶ Short-Acting: only last 4–6 hours
- ▶ Intended to be used **as needed**
- ▶ Carry with you at all times



2) Short-Acting Bronchodilators

Atrovent (ipratropium)

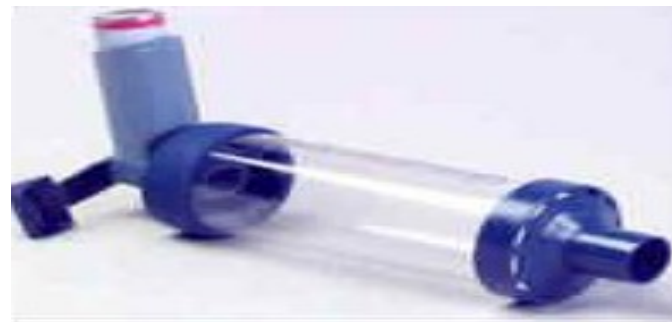
- ▶ Short acting but NOT fast acting
- ▶ Should be used regularly to work properly

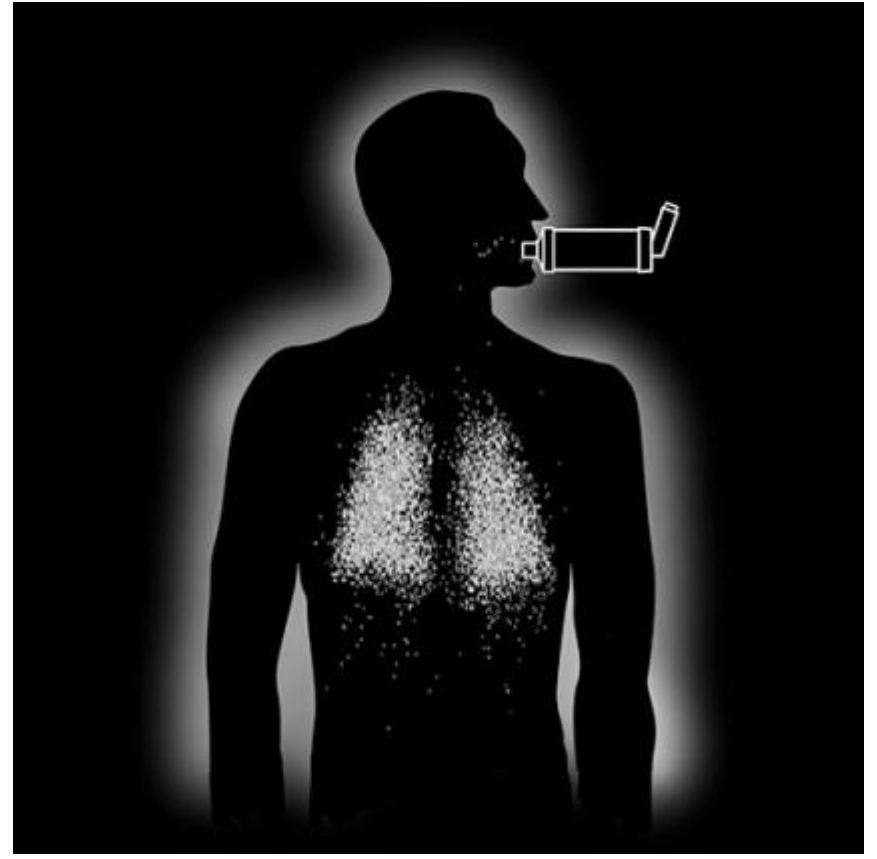
SHOULD BE USED WITH A SPACER DEVICE
WHY??



Benefits of a Spacer

- ▶ A spacer allows more drug to enter into the lungs versus closed mouth technique
- ▶ **ONLY** about 9% of patients using inhaled medications are actually using them properly
- ▶ Preferred method!





3) Combined Short-Acting Bronchodilators

Combivent (ipratropium + salbutamol)

- ▶ Short-acting but NOT fast acting
- ▶ Should be used regularly to work properly



4) Long-Acting Bronchodilators

- ▶ Last longer (12–24 hrs)
- ▶ Taken on a regular basis – once or twice a day
- ▶ Immediate effects may not be noticed
- ▶ Some side effects with these medications
 - Dry mouth, heart flutter, lightheadedness, increase in eye pressure
 - Consider **risk versus benefit**



Long-Acting Bronchodilators



- ▶ Spiriva (tiotropium)
- ▶ Seebri (glycopyrronium)
- ▶ Tudorza (aclidinium)
- ▶ Incruse (umeclidinium)
- ▶ Serevent (salmeterol)
- ▶ Fordadil (formoterol)
- ▶ Onbrez (indacaterol)
- ▶ Ultibro (indacaterol + glycopyrronium)
- ▶ Anoro (vilanterol + umeclidinium)
- ▶ Inspiolto (olodaterol + tiotropium)
- ▶ Duaklir (formoterol + aclidinium)



5) Combination long-acting bronchodilator and steroid medications

Symbicort (budesonide + formoterol)

Advair (fluticasone + salmeterol)

Breo (fluticasone + vilanterol)

- ▶ Combined inhaled corticosteroid and long-acting bronchodilator in one device
- ▶ Used to help prevent 'flare-ups' in *certain* people
- ▶ Must gargle, rinse and spit after each use → **WHY?**



6) Oral Bronchodilators

Theophylline

- ▶ Not as commonly used
- ▶ ‘**Add-on**’ therapy to treatment of severe COPD
- ▶ NOT for **immediate** relief
- ▶ Potential for food/drug interactions
- ▶ Levels must be monitored carefully by a blood test



7) Oxygen

- ▶ Oxygen is a **medication**
- ▶ Requires a prescription by your doctor
- ▶ Provincial Home Oxygen Program
- ▶ Pharmacare i.e. Portable tanks
- ▶ If you have any questions please consult the Respiratory Therapist



Medication Storage & Care

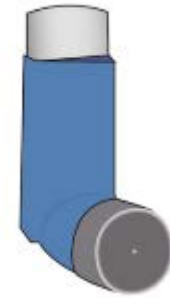
Where do you store your medications?

- ▶ Dry place away from heat and humidity
- ▶ Protect from light (i.e. Spiriva)
- ▶ Avoid exposure to extreme heat and cold
- ▶ Keep out of reach of children and pets
- ▶ Keep track of expiration date
- ▶ Need to clean devices regularly



Delivery Devices

- ▶ **Metered-dose inhaler (MDI/puffer)**



- ▶ **Dry Powder Inhaler (DPI)**

 - Turbuhaler

 - Diskus

 - Handihaler

 - Breezhaler

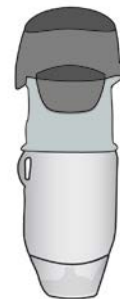
 - Genuair

 - Ellipta



- ▶ **Soft Mist Inhaler (SMI)**

 - Respimat



- ▶ **Nebulizer**





MDI techniques: Open-Mouth and Closed-Mouth



How To Use A Metered-Dose Inhaler (MDI) aka “puffer”

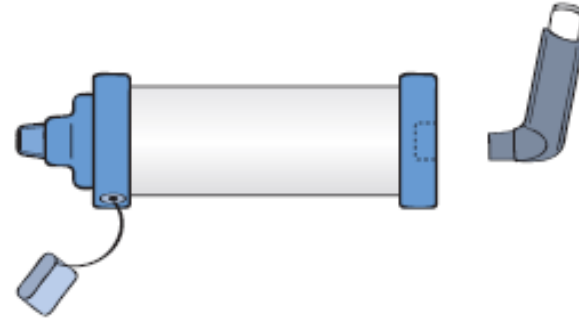
CLOSED MOUTH

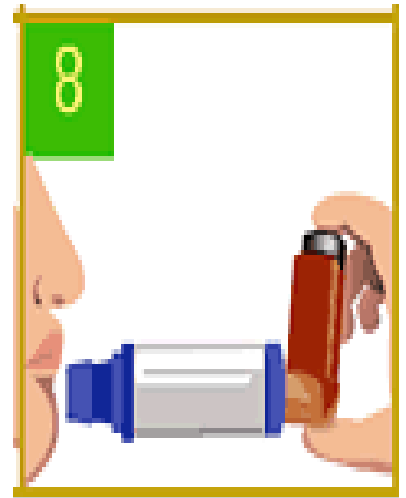
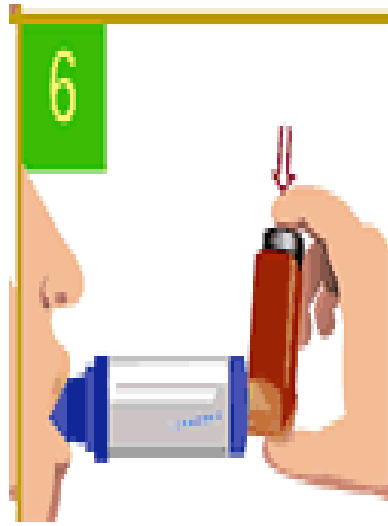
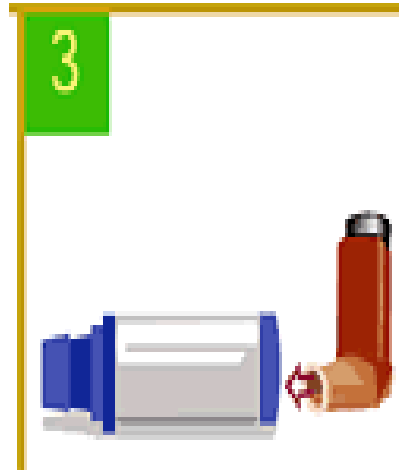
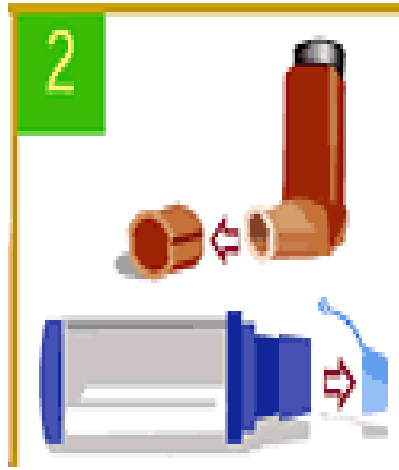
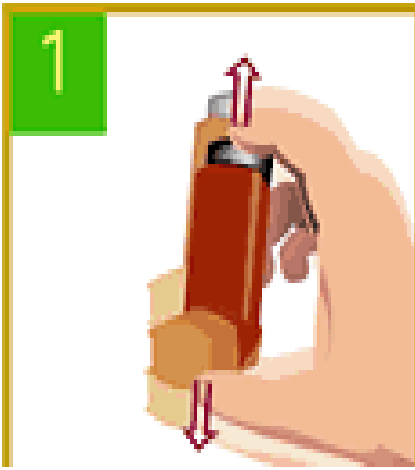
- Remove cap
- Shake well (about 7 or 8 times)
- Breathe normally
- Exhale (away from device)
- Tilt chin up slightly
- Inhale & depress cartridge once
- Keep breathing in **slow & deep**
- Hold breath 5 – 10 seconds
- Exhale slowly
- Replace cap
- **If a 2nd puff is needed, wait 30-60 sec before next dose**



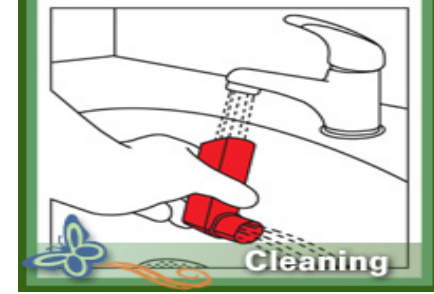
How To Use A Puffer (MDI) with a Spacer Device

- Shake the MDI
- Remove the caps
- Attach MDI to spacer
- Exhale (away from spacer)
- Seal lips around spacer mouthpiece
- Tilt chin up slightly
- Depress MDI into spacer device once
- Inhale **slow & deep**
- Hold breath 5 – 10 seconds
- Exhale slowly
- Replace cap
- **If a 2nd puff is needed, wait 30-60 sec before next do**






Maintenance of MDI



- ▶ **Once a week** remove the canister
- ▶ Soak the cap and plastic container in warm, soapy water, rinse & then allow to air-dry
- ▶ The canister should be kept warm, away from the cold and should not be put into water
- ▶ In case of exposure to the cold, roll the canister between the palms of your hands to warm it up
- ▶ It is NOT recommended to float your device in water to check the number of doses remaining



Spacer Maintenance

- ▶ Clean the device prior to the first use and once a week thereafter
 - ▶ Clean in warm soapy water and rinse with water by gently agitating in sink of water (ideal)
 - ▶ **Do not** run water from tap directly through valve as this could wreck it
 - ▶ Allow spacer to air dry, do not dry with a cloth
 - ▶ Some spacers can be cleaned in dishwasher – follow manufacturer instructions
- 

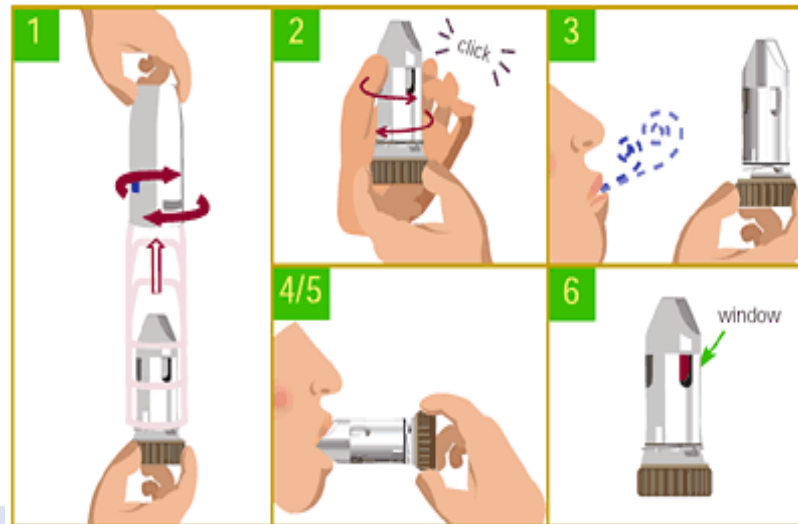
Dry Powder Inhalers

- ▶ Turbuhaler
- ▶ Diskus
- ▶ Handihaler
- ▶ Breezhaler
- ▶ Genuair
- ▶ Ellipta



How To Use a Turbuhaler®

1. Holding upright, remove the cap
2. Turn the base once in one direction as far as it goes & back in the other as far as it goes and you should hear ONE click. It doesn't matter which way as long as you **turn it twice and hear one click** (doesn't matter when you hear it).
3. Exhale (away from the device)
4. Tilting chin up slightly place between lips and inhale **fast & deep**
5. Hold breath 5 – 10 seconds then exhale
6. Once the **RED** mark appears in the window only **20** doses left



Always
replace
cap
when not
in use

How To Use A Diskus[®]

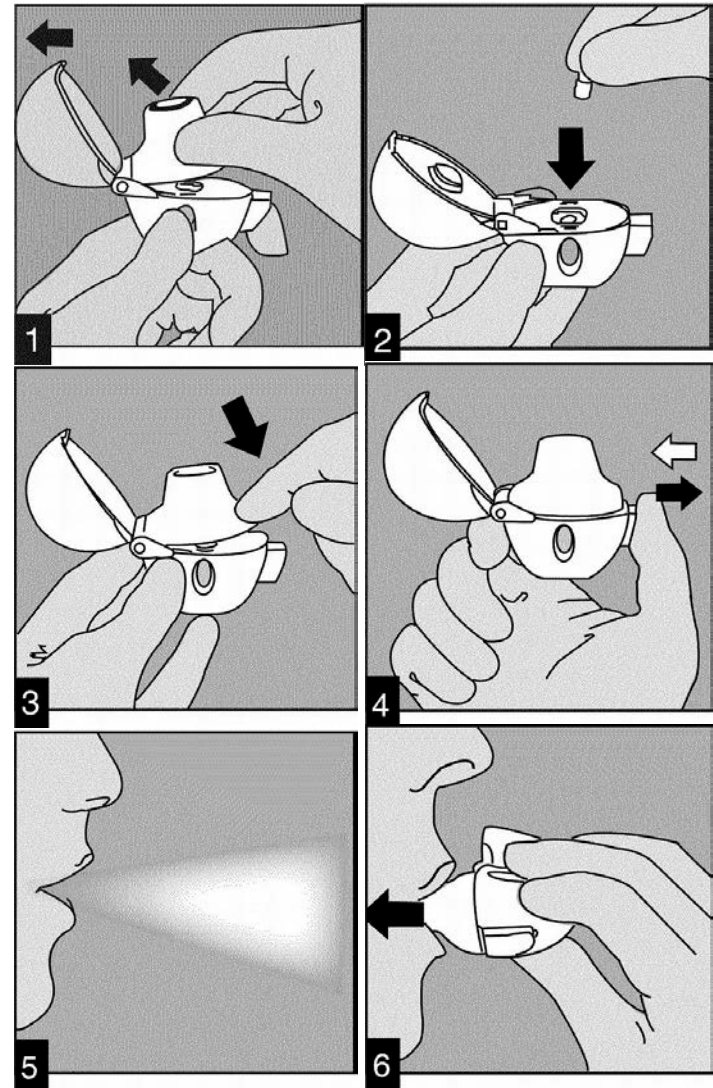
1. Open the Diskus[®]
2. Slide the lever all the way in one direction
3. Exhale (away from device)
4. Tilt chin up slightly
5. Seal lips around the mouthpiece
6. Inhale **fast & deep**
7. Hold breath 5 – 10 seconds
8. Exhale
9. Close Diskus[®]

***IMPORTANT:**
Make sure you
are holding
device upright so
that the
medication does
not pour out



How To Use A Handihaler[®]

1. Open dust cap and mouthpiece
2. Place capsule in center chamber
3. Close mouthpiece until click is heard
4. Hold upright and press button **once** & release
5. Exhale completely *away* from device
6. Place mouthpiece in lips, tilt chin up slightly. Breathe in **slow & deep** (*a whirling sound should be heard*)
7. Hold breath for 5-10 seconds then **REPEAT** last two steps
8. Open cap and Discard empty capsule
9. Close cap for storage
10. Wash your hands*



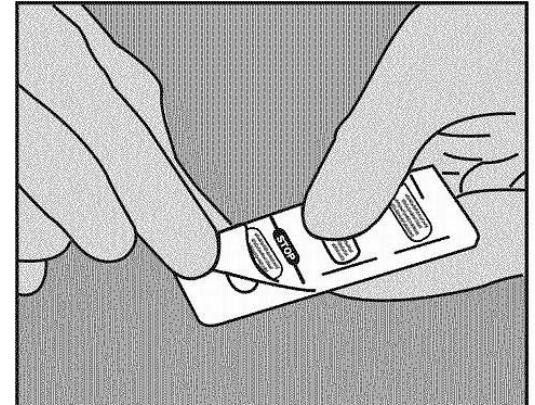
CAUTIONS of SPIRIVA



Do NOT swallow SPIRIVA capsules.



After putting the SPIRIVA capsule into the HandiHaler device, breathe in your medicine through your mouth.



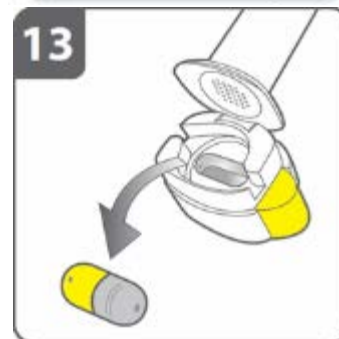
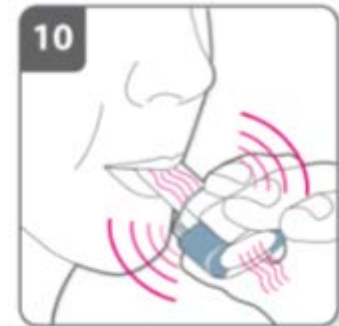
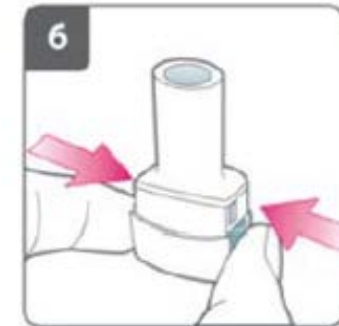
Medication is light sensitive – **DO NOT** pre-load the device or peel package past the **STOP** line

Medication can cause increased pressure in the eyes so **DO NOT TOUCH EYES** after touching capsule and **ALWAYS** wash hands after use

Breezhaler



1. Remove dust cap and lift the mouth piece
2. Remove single capsule from blister pack
3. Place capsule 'sideways' into device
4. Close mouth piece
5. Press the TWO buttons on the side of the device **once** and release
6. Exhale away from device
7. Wrap mouth around mouth piece. Inhale **fast** and **deep**. You may hear a whirling sound
8. Hold breath for 5–10 seconds
9. **REPEAT** last 2 steps
10. Discard the used capsule



Genuair



PRESS the green button
all the way down



RELEASE the green
button

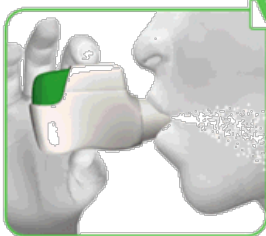


Ready to use ✓

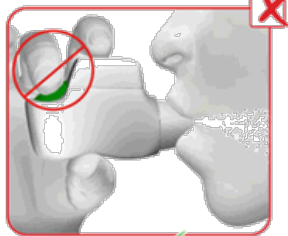


**ATTENTION: DO NOT HOLD THE GREEN BUTTON
DOWN WHILE YOU ARE INHALING.**

CORRECT ✓

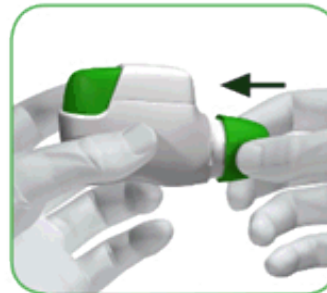


INCORRECT ✗

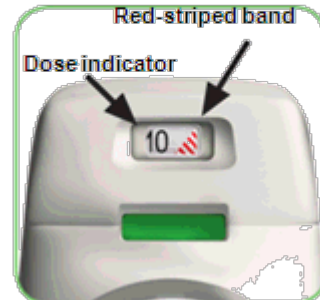


Inhale a long steady
deep breath.
Hold your breathe
for 5–10 seconds

Inhaled correctly ✓



Dose indicator goes down by intervals
of 10: 60, 50, 40, 30, 20, 10, 0.



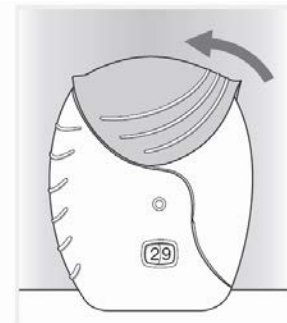
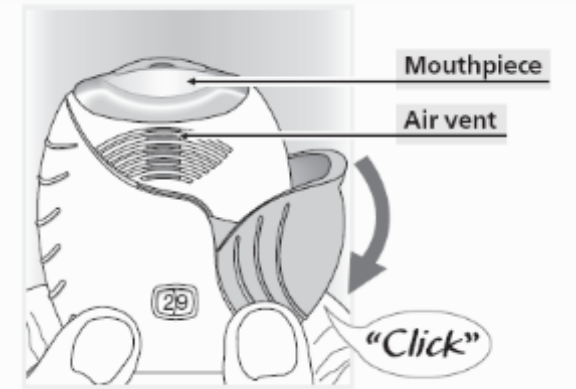
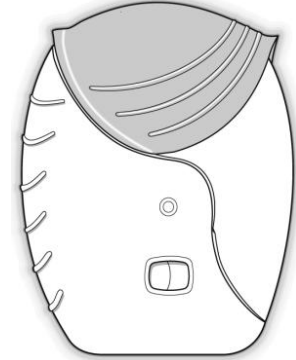
How To Use the Genuair[®]

1. Remove the cap (*lightly squeeze the arrows on the sides*)
2. Press and release the end button
3. Check that the colour control window is green. Green = ready
4. Breathe away from the inhaler. Inhale **fast** and **deep** through the mouthpiece. **Keep breathing in even after you hear the inhaler "click"**
5. Check that the colour control window has turned to red. If not, repeat inhaling strongly and deeply.
6. Replace cap



Ellipta

1. Keep closed until you are ready to inhale a dose
2. When ready, slide the blue cover to the side until you hear a click
3. The dose counter will count down by one
4. This shows that the dose is ready to inhale
5. While holding the inhaler away from your mouth, exhale a complete breath.
6. **Do not** breathe into the device.
7. Put the mouthpiece between your lips, and close your lips firmly around it.
8. **Do not** block the air vent with your fingers.
9. Take one **fast** and **deep** breath in. Hold this breath for as long as possible (5-10 seconds).
10. Remove the inhaler from your mouth.
11. Exhale slowly and gently, close device.



How To Use a RESPIMAT® - SMI

1. Inserting the cartridge



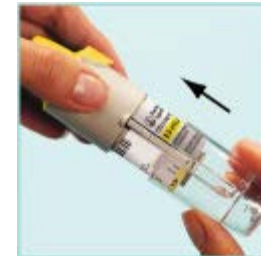
With cap closed, press safety catch while pulling off the clear base



Take cartridge out of box. Push the narrow end of the cartridge into the inhaler until it clicks.



Press the cartridge firmly against a firm surface to ensure that it has gone all the way in



How To Use a RESPIMAT®

2. Priming the Respimat for first-time use



1) Hold Respimat upright with cap closed. **Turn** the base in the direction of the black arrows on the label until it clicks (half a turn)

2) **Open** the cap until it snaps open

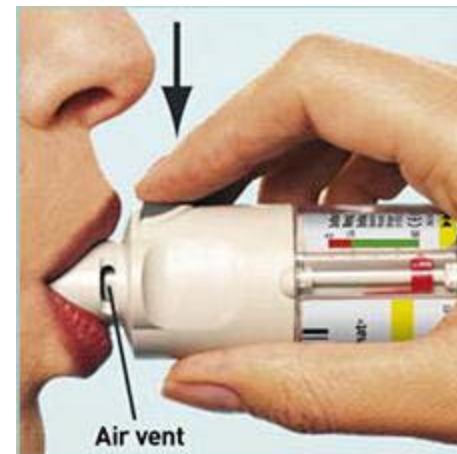
Point the Respimat
towards the ground
Press the dose release
button. Close the cap.

3) **Press**

4) Repeat **TOP** steps until a cloud is visible. Then repeat steps three more times to ensure the inhaler is prepared for use.

How To Use a RESPIMAT®

1. Hold the inhaler upright with cap closed
2. **TURN** the base in direction of the white arrows on the label until it clicks (half turn)
3. **OPEN** the cap until it snaps fully open
4. Breathe out slowly and fully
5. Close lips around the mouthpiece without covering air vents
6. Point the inhaler to the back of the throat
7. While taking slow, deep breath, **PRESS** the dose release button and continue to breath in **slow** and **deep**
8. Hold breath for 10 seconds or as long as you can and close the cap





Sanitizing Dry Powder Inhalers

- ▶ Not usually necessary
- ▶ DO NOT USE WATER – can cause medication to clump and clog device
- ▶ Wipe mouth piece as needed and more frequently if you are sick

DID YOU KNOW: The flu virus can live on a dry surface for up 48 hours



Medication Storage

- ▶ Store all devices in a dry place (NOT THE BATHROOM)
- ▶ Close all devices when not in use
- ▶ Keep out of direct frost, heat, sunlight and out of high temperatures ($> 30^{\circ}$)
- ▶ Keep track of the number of doses so that you do not run out





Problems with Managing Medications

- 1) Brainstorm:
 - What problems do you have with managing medications?
- 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

Time to Take Action: Knowledge is key...

“Don't wait
until you
are ready
to take action.
Instead, take
action to be
ready.”

Jensen Siaw


1 Mar 2013 4:39 pm

Action Plan



- ▶ Can help you stay healthy
- ▶ Consists of instructions about what to do and how/when to do it
- ▶ Early action is important!

Action Plan Details:

- ▶ Written contract between you and your doctor
 - ▶ How to manage your flare-up
 - ▶ Quickly recognize and treat flare-ups
 - ▶ Prevent further worsening
 - ▶ Avoid an emergency room visit
 - ▶ Important: This does NOT replace a visit with your Primary Care Provider
- 

For more information on the COPD ACTION PLAN Ask your Doctor

My COPD Action Plan _____ Date _____
Patient's Copy (Patient's Name)



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 URGENT
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	Take Action	Call For Help
	I use my daily puffers as directed.	If I checked 'Yes' to one or both of the above, I use my prescriptions for COPD flare-ups.	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. If I am on oxygen, I will increase it from _____ L/min to _____ L/min.	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.

My COPD Action Plan _____ Date _____
Patient's Copy (Patient's Name)



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: _____

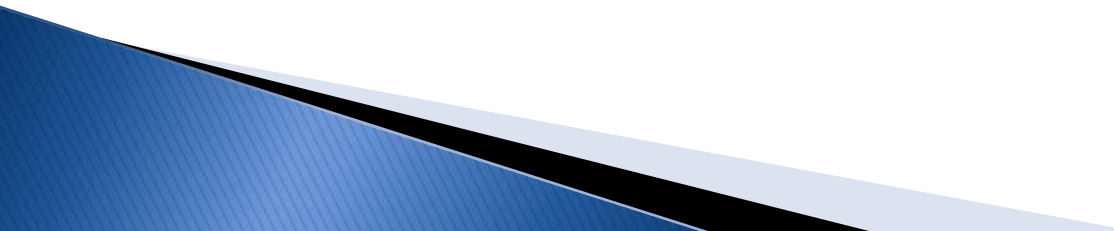
Once I start any of these medicines, I will tell my doctor, respiratory educator, or case manager within **2 days**.

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

License Date



Action Plan Components

- ▶ **GREEN ZONE: I feel well**
 - ▶ **YELLOW ZONE: I feel worse** (environment/stress)
 - Prescription for COPD Flare-Up
 - ▶ **RED ZONE: I feel I am in danger**
- 

Action Plan (Part 1)

My COPD Action Plan _____ Date _____
 Patient's Copy (Patient's Name)



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 URGENT
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	Take Action	Call For Help
	I use my daily puffers as directed.	If I checked 'Yes' to one or both of the above, I use my prescriptions for COPD flare-ups.	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.	



I Feel Different Because of A Flare-up

- ▶ More shortness of breath than usual
 - ▶ Using more of your rescue/reliever medication
 - ▶ Coughing more than usual/started coughing
 - ▶ Changes in phlegm/sputum
 - More phlegm/sputum
 - Is now *yellow* or *green* or *brown*
 - Is thicker/stickier than usual
 - ▶ Symptoms that last longer than 2 days are signs of a flare-up
- 

Action Plan (Part 2)



My COPD Action Plan _____ Date _____
Patient's Copy (Patient's Name)



Canadian Respiratory
Guidelines



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: _____

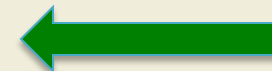


(B) If the first antibiotic was taken for a flare-up in the **last 3 months**, use this different antibiotic instead:
Start antibiotic _____ Dose: _____ #pills: _____
How often: _____ for #days: _____



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.

Start Plan if enter yellow zone on day

2

My Actions

- ▶ Notify contact person
 - ▶ See Primary Care Provider
- OR**
- ▶ Start additional treatment according to *your* **Action Plan Part 2**; this may include:
 - Rescue/Reliever Medication
 - Antibiotic
 - Prednisone
 - Oxygen

A screenshot of a 'My COPD Action Plan' form. The form is titled 'My COPD Action Plan' and includes fields for 'Patient's Name' and 'Date'. It contains instructions for patients on how to use the form and provides a structured area for medical instructions. The instructions include: 1. (a) If the colour of your sputum CHANGES, start antibiotic; (b) If the first antibiotic was taken for a flare-up in the last 3 months, use the different antibiotic instead; 2. If you are MORE short of breath than usual, start prednisone. The form also has sections for 'My support contacts are', 'Prescription for COPD flare-up (please be sure to obtain a full prescription as needed for completion)', and 'Once I start any of these medicines, I will call my doctor, respiratory educator, or case manager within 2 days.' At the bottom, there are fields for 'Doctor's Name', 'Doctor's Fax', 'Doctor's Signature', 'License', and 'Date'. Logos for the Canadian Respiratory Guidelines and COPD are visible in the top right corner.

My Actions (Red Zone)



- ▶ Notify contact person and/or see primary care provider
- ▶ After 5pm or on weekends, go to the hospital emergency department or urgent care centre.

My COPD Action Plan _____ Date _____
Patient's Copy _____ (Patient's Name) _____

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 _____	I feel short of breath for _____ or at least 2 days. Yes <input type="checkbox"/> No <input type="checkbox"/>	My symptoms are not better after taking my _____ medicine for 48 hours.
I feel short of breath.	When I do this: _____	I am very short of breath, nervous, confused and/or drowsy, and/or I have chest pain.	URGENT
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. 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.	Call For Help I will call my support contact and/or see my doctor and/or go to the nearest emergency department. I will dial 911.
	If I am on oxygen, use _____ L/min.	I use my breathing and relaxation methods as taught to me. I pace myself to save energy. If I am on oxygen, I will increase it from _____ L/min to _____ L/min.	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.
Notes:	_____	_____	_____

Produced in collaboration with the COPD & Asthma Network of Alberta (CANAA). The Canadian Thoracic Society (CTS) acknowledges the past contributions of Lung Well with COPD and the Family Physician Alliance Group of Canada. PART 1 OF 2

How do I get this started?

- ▶ Book an *extended* primary care provider appointment
- ▶ Action plan = Prescription contract
- ▶ Build TRUST with your primary care provider and pharmacist
- ▶ Remember, this prescription contract does not replace a visit with your doctor.



Key Messages:

- ▶ It is important to know what to do in the case of a ‘flare-up’
- ▶ Early action is key!
- ▶ Using your action plan can help avoid a trip to the ER
- ▶ Make a *partnership* with your Primary Care Provider and your Pharmacist!
- ▶ Let us help you be an advocate for *you!*





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

Thank you



Questions?

Acknowledgements

This presentation includes materials contributed by:

- Saskatoon Health Region's LiveWell™ Chronic Disease Management Program
- Lung Association of Saskatchewan COPD Toolkit©
- WRHA Pulmonary Rehabilitation Program