Optimizing COPD Care During COVID

Ensure patients are optimally protected during a dedicated COPD visit

- What type of visit did you have with your patient?
 Telephone Video In person
- **2.** Is there something that the patient was able to do 6 months ago that they cannot do today?
- **3.** Since the patient's last visit, have they been in the habit of refilling their prescriptions monthly?

Understanding the patient's COPD health status

- □ Assess COPD burden based on symptoms and disability
 - CAT (<10 mild, 10-20 moderate, >20 severe)
 - The minimum important difference of the CAT is 2 points¹
 - MRC (1-5, higher number indicates greater disability)
 - How often are you using your ventolin?
- □ Identify "at risk" patients. Since their last visit, has the patient experienced worsening symptoms requiring:
 - Antibiotic (Abx) and/or prednisone (OCS)
 - ER visit and/or hospitalization

Prioritize patient concern

Increasing symptom burden

What to look for: Increased use of ventolin, increase in MRC or CAT score

Goal: Maximize lung function and reducing breathlessness

Consider²:

- Step up from LAMA to LAMA/LABA
- Step up from LAMA/LABA or ICS/LABA to ICS/LAMA/LABA

High risk for exacerbation

What to look for: More than 1 course of Abx and/or OCS, or 1 hospitalization

Goal: Reduce risk of future exacerbation

Consider²:

- Step up from LAMA to LAMA/LABA
- Step up from LAMA/LABA or ICS/LABA to ICS/LAMA/LABA
- Providing the patient with a course of Abx and/or OCS

1. Lancet Respir Med. 2014 Mar;2(3):195-203. doi: 10.1016/S2213-2600(14)70001-3. Epub 2014 Feb 4. 2. Bourbeau, J. et al (2019): Canadian Thoracic Society Clinical Practice Guideline on pharmacotherapy in patients with COPD - 2019 update of evidence, Canadian Journal of Respiratory, Critical Care, and Sleep Medicine, DOI: 10.1080/24745332.2019.1668652

	Medical Research Council Breathlessness Scale
1	Not troubled by breathlessness except on strenuous exercise
2	Short of breath when hurrying on the level or walking up a slight hill
3	Walks slower than most people on the level, stops after a mile or so, or stops after 15 minutes walking at own pace
4	Stops for breath after walking about 100 yds or after a few minutes on level ground
5	Too breathless to leave the house, or breathless when undressing
	Oxford Academic. The MRC breathlessness scale, https://academic.oup.com/view-large/figure/22175352/occumedkgm162f01 ht.gif

COPD Assessment Test[™](CAT) SCORE I never cough 4 I cough all the time I have no phlegm (mucus) in my My chest is full of phlegm (mucus) 4 (5)chest at all My chest does not feel tight at all My chest feels very tight When I walk up a hill or a flight of When I walk up a hill or a flight of stairs I am not out of breath stairs I am completely out of breath I am not limited to doing any I am completely limited to doing activities at home all activities at home I am confident leaving my home I am not confident leaving my home 5 despite my lung condition at all because of my lung condition I do not sleep soundly because of I sleep soundly my lung condition I have lots of energy I have no energy at all

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TOTAL SCORE

With every assessment

- **1.** Confirm that the pharmacist has reviewed inhaler technique with the patient
- **2.** Ensure that your patient has instructions on how to manage flare-ups (i.e action plan)
- **3.** Encourage patients to remain active and exercise regularly
- 4. Review smoking status & inquire about interest in smoking cessation strategies (if still smoking)
- □ 5. Remind patient to protect themselves: Use a mask and hand sanitizer when you're in a public place
- **6.** Inquire about vaccination status (annually)