Exacerbation Characteristics of Patients attending a COPD Clinic

Objectives:

- >Investigate patients' exacerbation rate
- Compare Crisis Pack (CP) usage pattern between high-risk & low-risk COPD patients
- Assess differences in acquiring breathing control & bronchial hygiene (BCBH) knowledge

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Methodology

Exacerbation data (Clinical Management System):

- > AED attendance
- > Hospital admissions
- SOPD / Family Medicine Clinic (FMC)
- consultations
- Crisis Pack prescription
- **COPD Clinic:**

➤ Breathing control & bronchial hygiene (BCBH)

scores









Global Strategy for Diagnosis, Management and Prevention of COPD

Combined Assessment of COPD

Results (n = 170)

Limitation) (GOLD Classification of Airflow Patients: 94
Exacerbation episodes: 387
AED attendance: 16%
Hospital admission: 61%
SOPD / FMC consultation: 10%
Crisis Pack prescription: 13%

Patients: 76
Exacerbation episodes: 87

Patients: 76
Exacerbation episodes: 87
AED attendance: 3%
Hospital admission: 60%
SOPD / FMC consultation: 3%
Crisis Pack prescription: 34%

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North District Hos

mMRC ≥ 2 Quality Effective
Health Care



Results (n = 170)

| | High risk group | Low risk group |
|------------------------------------|---------------------------|----------------|
| Patients | 94 | 76 |
| Exacerbation episodes | 387 | 87 |
| Exacerbation rate in total | 2.7 | 77 |
| Mean exacerbation rate | 4.1 | 1.1 |
| AED attendance | 16% | 3% |
| Hospital admission | 61% | 60% |
| SOPD/ FMC consultation | 10% | 3% |
| Crisis Pack Prescription | 13% | 34% |
| Initiated Crisis Pack | 13.5% | 33.3% |
| Knowledge on Breathing | No significant difference | |
| Control & Bronchial Hygiene (BCBH) | (P>0.05) | |
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Discussion

- High-risk & low-risk patients showed equivalent ability in learning breathing control and bronchial hygiene knowledge
- >AED attendance & Crisis Pack usage differed
- >Identification of high-risk patients
 - >may facilitate disease management education
 - ➤ Increased Crisis Pack usage may reduce AED attendance



