A community-based pulmonary rehabilitation programme in Hong Kong East Cluster

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Introduction
Introduction The COPD Outpatient-Non-government organization Community Engagement Rehabilitation Network (CONCERN) programme is an HKEC pilot utilizing a chronic disease management model. Following the success of the “Phone CONCERN” to support home COPD patients, CONCERN engages the Community Rehabilitation Network (CRN 社區復康網絡) to pilot the first community-based pulmonary rehabilitation programme (PRP) in Hong Kong. The purpose of the study is to empower COPD patients to cope with their illness utilizing a community-based PRP and to evaluate its safety and effectiveness in reducing healthcare utilization.

Objectives
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Methodology
Methods 1. Resp nurses and doctors invited CRN to co-organize a PRP. 2. Resp nurses provided training to CRN staff. 3. A modified PRP was designed. A total of 6 weekly PRP sessions, each consisted of 1 hour supervised gentle exercise and 1 hour education on essentials of COPD self-care management. 4. Resp nurses recruited the ambulatory Stage 2 and 3 COPD patients as inclusion criteria. 5. Compare the six months pre and post PRP statistics on: 1. AED attendance rate 2. Hospital admission rate 3. Average length of stay

Result
Results 10 PRP classes were held by CRN in Nov 2009 - Sep 2014. Evaluation results from the 10 classes were: ☐ Completion rate 61.3% (92/150 patients referred)
☐ PRP classes attendance rate 82.6% (456/552 lessons) ☐ Average age 72.9
years (SD 7.9 years) among completers □ 91 % male and 9% female Comparing pre- and post-PRP, average AED attendance decreased from 0.65 to 0.42 time/person (-35%, p≤0.05) and average admission from 0.478 to 0.304 time/person (-36%, p≤0.05). Total hospital stay decreased from 172 to 123 days and average from 1.87 days to 1.34 days/person (-28%, p≤0.05). Adverse reactions during PRP and patient mortality were not observed. Conclusion Community-based PRP for stable GOLD Stage 2 and Stage 3 COPD patients in this pilot study was safe and was effective in reducing healthcare utilization.