



**Service Priorities and Programmes**  
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**How Well are we Managing Patients with Chronic Obstructive Pulmonary Disease (COPD) in primary care setting?**

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**Keywords:**

COAD

**Introduction**

With the update on Global Initiative for Chronic Obstructive Lung Disease (GOLD) guideline in 2017, it is right time to review our treatment strategy for patients with COPD in primary care setting.

**Objectives**

To review (1) the diagnostic accuracy of COPD in a GOPC based on the GOLD 2017 guideline and (2) the situation in using standard assessment tools to evaluate COPD patients (3) the influenza and pneumococcal vaccination rate (4) the extend of intervention on smokers in COPD patients

**Methodology**

A retrospective cross-sectional study was performed. All records of COPD patients who had follow-up at CSW JC GOPC from 1 Jul 2016 to 30 Jun 2017 were reviewed.

**Result**

A total of 191 patients labelled as COPD were reviewed. 69 of them were excluded as they are either followed up by other departments or were known to have other lung pathologies e.g carcinoma of lung, bronchiectasis.

(1) Diagnostic accuracy: Among the 122 recruited cases, only 66 patients (54%) had spirometry ever performed.

(2) Use of assessment tools: Symptoms scores were only available for 35 patients. 21, 10, 4 patients were regarded as Group A, B and D respectively.

(3) Vaccination rate: 105 patients (aged  $\geq$  65) were eligible for influenza and pneumococcal vaccination based on Government Vaccination Program criteria. Only 47 patients (44%) had taken influenza vaccine for year 16/17. 77 patients (73%) had taken pneumococcal vaccine in their life (all were 23-valent pneumococcal polysaccharide vaccine)

(4) Smoking status and intervention: Among the 122 recruited cases, 90 patients were ex-smoker, 30 patients were still active smoker. All of the active smokers were not yet recruited in smoking cessations program.

Conclusion: With the availability of spirometry at GOPC, the diagnosis of our COPD patients should be reassessed. Proper classification is also important for better patient care, especially with the new availability of long-acting bronchodilators in GOPC. With the newly inclusion of pneumococcal conjugate vaccine (PCV13) for

adults into the government vaccination program and enhancement of influenza vaccination, we hope to provide better protection for them. Smoking cessation should continue to be advised. Multidisciplinary care approach involving nurses and allied health will be developed at GOPC to achieve better COPD control.