Medicine Today CPD Journal Program

Questions
Please note you must answer these questions online (www.medicinetoday.com.au/cpd) to take part in this activity; we will not mark any answers that are posted, faxed or emailed to Medicine Today.

December 2015 issue, Module 3
Précis of the COPD clinical guidelines (the ‘even more concise’ guide to COPD)

The questions in this module are based around the article ‘Précis of the COPD clinical guidelines (the ‘even more concise’ guide to COPD’ (Medicine Today 2015; 16(12): 30-37), which should be read before attempting the module.

Learning outcomes
• Recognise symptoms of chronic obstructive pulmonary disease (COPD)
• Arrange investigations for a patient with suspected COPD
• Recommend an ideal clinical support team for a patient with COPD
• Grade COPD severity
• Tailor COPD therapy for an individual patient

Question 1. Which two of the following statements about COPD are correct?

a. Risk factors for COPD include smoking, older age and chronic asthma
b. Airway inflammation in COPD is generally more corticosteroid-responsive than in asthma
c. An increase in forced expiratory volume in one second (FEV₁) of more than 50 mL with salbutamol suggests asthma rather than COPD
d. Twelve-month mortality after hospitalisation for a COPD exacerbation is higher than that after myocardial infarction

Case study. Betty is a 44-year-old Indigenous woman. You mostly see her grandchildren, who live with her. Today she comes alone. After a bit of a chat, she volunteers that she is having trouble with her breathing. For some months, she has been getting breathless when she walks more than a short distance, even on level ground. This is limiting her daily activities. She also has a productive cough. You consider the possibility of COPD.

Question 2. COPD should be considered as a diagnosis in patients aged 35 years or older with reduced activity levels who have which three of the following symptoms?

a. Breathlessness
b. Recurrent fevers
c. Cough
d. Impaired exercise tolerance

After taking a history and examining Betty, you undertake investigations to assess your suspicion of COPD.

Question 3. Which one of the following is the recommended initial test to confirm a provisional diagnosis of COPD?

a. Spirometry
b. Chest x-ray
c. Arterial oxygen saturation (SaO₂)
d. CT chest scan

Investigations confirm your provisional diagnosis of COPD. You assess the severity of Betty’s COPD. On testing, her forced expiratory volume in 1 minute (FEV₁) is 52% of predicted, with a ratio of FEV₁/forced vital capacity (FEV₁/FVC) <0.7.

Question 4. What is the grade of severity of Betty’s COPD? Select the single most correct answer.

a. Minimal
b. Mild
c. Moderate
d. Severe

You recommend some nonpharmacological interventions for Betty.

Question 5. List at least three nonpharmacological interventions that can be beneficial for patients with COPD.

You check Betty’s immunisation status and recommend that she receives a number of vaccines.
Question 6. What vaccinations are recommended for patients with COPD? List at least one vaccination recommended for patients with COPD.

You consider prescribing a medication for Betty to improve her breathlessness and cough.

Question 7. Which one of the following is recommended as initial therapy in the stepwise pharmacological treatment of a patient with stable COPD who does not have severe disease or frequent exacerbations?

a. Antibiotics
b. Bronchodilators
c. Inhaled corticosteroids
d. Mucolytics

You start Betty on a trial of a medication to reduce her symptoms.

Question 8. How long is an adequate trial of a medication to reduce symptoms of COPD? Select the single most correct answer.

a. A day
b. A week
c. A fortnight
d. A month

Betty does not respond as well as you hoped to the initial medication you prescribe. She particularly struggles when she has an intercurrent respiratory tract infection. After checking that she is using her inhaler device correctly and is adhering to her treatment regimen, you consider the next steps in management.

Question 9. List the four steps in the recommended pharmacological management of a patient with COPD.

For patients with COPD such as Betty, access to a clinical support team can enhance quality of life and reduce disability.

Question 10. The clinical support team for a patient with COPD may include a range of healthcare professionals. Ideally, who would you include?

a. Practice nurses
b. Exercise physiologist
c. Dietitian
d. Other – please write the clinicians you would use in the box below.