

Feb 16, 2022

PRESENTED BY: COLLEEN LEWIS, Nurse Practitioner ANNA TOLONEN, Registered Nurse

HOUSEKEEPING

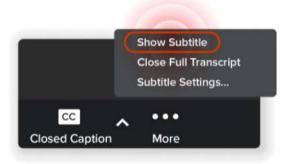
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2. Show / hide captions

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- The webinar today will be approx. 30 minutes with time for questions to follow
- If you have any questions please use the chat/question section at the bottom of the Zoom screen to ask, to ensure your privacy. We will be monitoring your questions.

Please be advised this presentation is being recorded and any questions you post in the chat section will be answered during the recording (your personal information will not be shared).



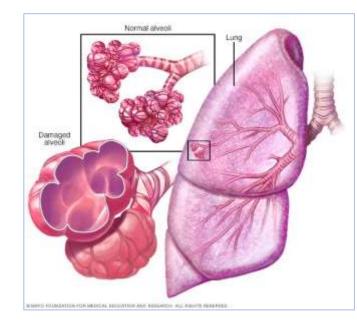
Upon completion of this webinar, you will have learned about the following topics:

- What is COPD including causes, symptoms, diagnosis, treatment, medications and triggers
- What is a COPD flare-up, including how to prevent and treat
- Breathing techniques and positioning to help with shortness of breath
- Energy conservation
- Coping with anxiety
- COPD and exercise
- Chronic disease and advance care planning

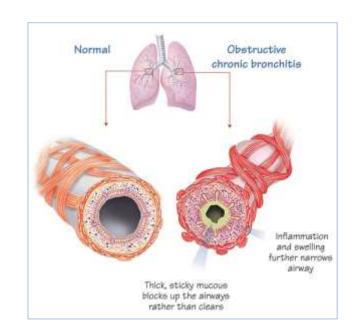
WHAT IS COPD?

Chronic Obstructive Pulmonary Disease

Emphysema



Chronic Bronchitis



WHAT CAUSES COPD?

The number one cause of COPD: SMOKING

Other causes can include:

- Second-hand smoke
- Air pollution (dust or chemicals)
- Repeated childhood lung infections
- Severe asthma
- Asthma combined with smoking
- Alpha-1 antitrypsin deficiency (rare genetic disorder)



WHAT ARE THE MAIN SYMPTOMS OF COPD?

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Fatigue or feeling tired

A cough lasting more than 3 months

Cough with mucus production

Wheezing

More frequent infections (cold, flu, pneumonia) and longer recovery time

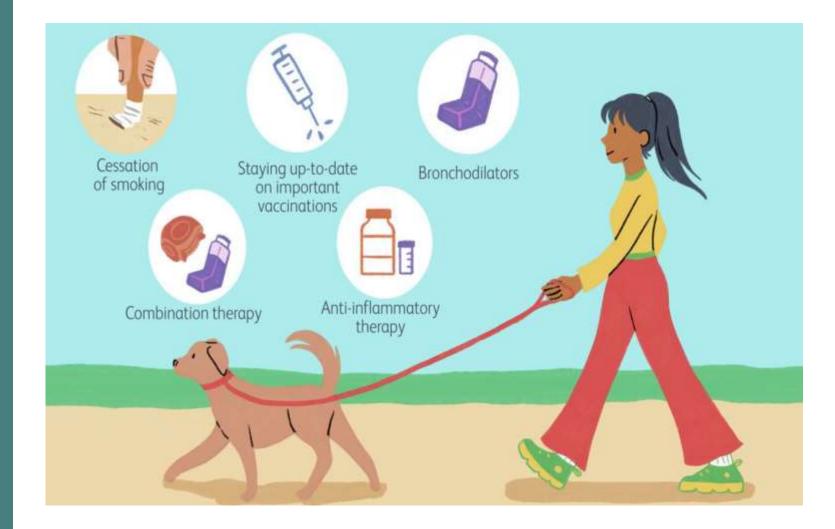
HOW IS COPD DIAGNOSED?

• Health history completed by your healthcare provider

- Spirometry
- Chest x-ray
- Oximetry
- Other tests

HOW IS COPD TREATED?

- Quitting smoking
- Take your COPD medications as directed
- Stay up to date on your vaccines: flu, pneumonia, Covid 19
- Oxygen therapy



COPD MEDICATIONS

There are a variety of oral and inhaled medications that can improve your COPD symptoms and quality of life

- Inhalers bronchodilators and combined bronchodilators and anti-inflammatories
- Antibiotics
- Supplemental oxygen
- Vaccines (flu, Covid 19, pneumonia)





Inhalers (puffers)

Northumberland Family Health Team

Inhalers are the main type of medication for COPD

Reduces the risk of COPD flare-ups

Bronchodilators: open up airways and makes breathing easier

- E.G. short acting: Ventolin (rescue inhaler), Atrovent
- Long-acting: Incruse, Spiriva (need to be taken every day)

Combination long-acting bronchodilators and/or corticosteroids

- Contain two to three medications in one inhaler
- Need to be taken every day
- E.G. Advair, Breo, Symbicort, Anoro, Duaklir, Inspiolto, Ultibro, Trelegy

IMPORTANCE OF INHALER TECHNIQUE

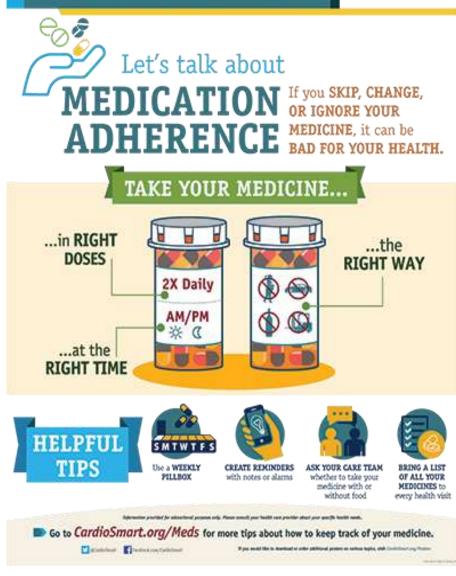
- Proper inhaler technique is essential to manage and prevent symptoms like shortness of breath and wheezing
- Using certain inhalation devices and maintaining good technique can be challenging for some people
- Learning the right technique may be difficult but it's important for the medication to get to your airways and work properly
- There are many different types of inhalers- too many to review here. Please speak with your doctor, NP, nurse or pharmacist to ensure you have proper inhaler technique for the inhalers you use

ORAL MEDICATIONS

- Corticosteroid pills: used for a short period of time – usually during a COPD flare-up
- Antibiotics: may be prescribed for bacterial infections in the lungs which lead to a COPD flare-up



CardioSmart



Northumberland

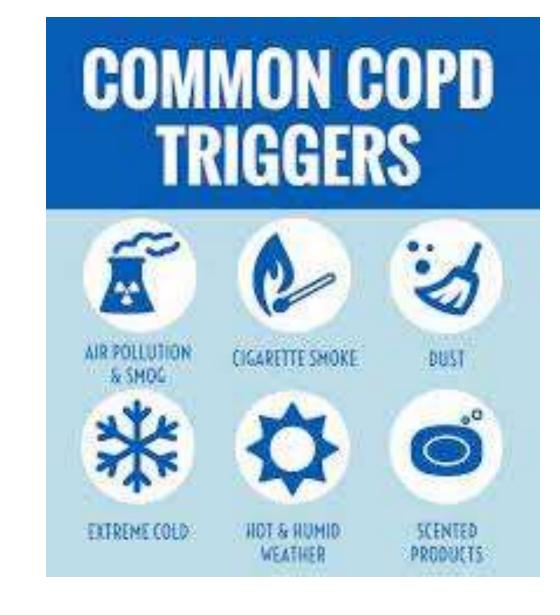
Family Health Team

Remember!

It is important to take your medications regularly and exactly as prescribed to get the full benefit.

COPD TRIGGERS

- Know and avoid triggers- triggers are things that can worsen your COPD.
- Common triggers include scents, cold air and/or hot humid air, air quality, wind, smoke, chemicals, emotions, respiratory infections
- As you learn what things worsen your COPD, you can learn to avoid them



COPD FLARE-UPS

- A COPD flare-up occurs when your COPD symptoms get worse
- Flare-ups are usually caused by COPD triggers
- This is the main reason people with COPD go to the hospital
- Flare-ups should not be ignored

HOW TO HANDLE COPD FLARE-UPS

- Stay healthy
- Recognize COPD flare-up symptoms
- Start treating a COPD flare-up quickly
- Learn when to call your doctor or go to the ER





STAY HEALTHY

6





more out of breath

more out of breath despite taking my reliever medicines

more phlegm, change in colour: dark yellow, green



more chesty coughing

RECOGNIZE COPD FLARE-UP SYMPTOMS

- Feeling more tired than usual
- Increased shortness of breath
- More coughing than usual
- Your mucus changes colour– may be green, yellow, brown or rust-coloured
- You have more mucus than usual or it becomes thicker and/or stickier
- Fever, sore throat or cold symptoms
- Need to sit up or sit in chair to sleep
- Feeling unwell

COPD FLARE-UP: START TREATMENT EARLY

My goals are My support contacts are and (Name & Phone Number) (Name & Phone Number) C URGENT My Symptoms I Feel Well I Feel Worse I Feel Much Worse My usual sputum colour is: Changes in my sputum, for at My symptoms are not better after taking my I have sputum. least 2 days. Yes 🗆 No 🗖 flare-up medicine for 48 hours. When I do this: I feel short of I am very short of breath. More short of breath than usual for at 7-00 least 2 days. nervous, confused and/or breath. Yes No D drowsy, and/or I have chest pain. Stay Well Take Action Call For Help I will call my support contact and/or see I use my daily puffers as directed. If I checked 'Yes' to one or both of the above, I use my prescriptions for my doctor and/or go to the nearest My Actions COPD flare-ups. emergency department. If I am on oxygen, I use _____ L/min. I use my daily puffers as usual. If I am £=000 I will dial 911. more short of breath than usual, I will take ____ puffs of _____ up to a maximum of ____ times per day. Notes: I use my breathing and relaxation Important information: I will tell my doctor, methods as taught to me. I pace myself respiratory educator, or case manager within 2 days if I had to use any of my to save energy. flare-up prescriptions. I will also make If I am on oxygen, I will increase it follow-up appointments to review my from L/min to L/min. COPD Action Plan twice a year.





(Patient's Name)

This is to tell me how I will take care of myself when I have a COPD flare-up.



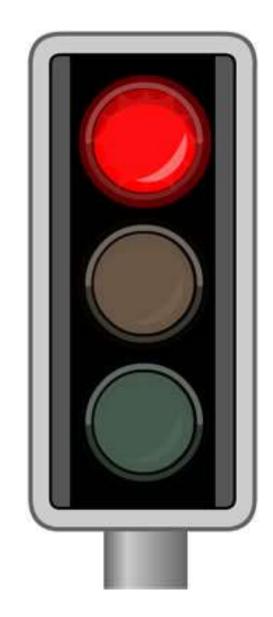
My COPD Action Plan _____ Patient's Copy

__ Date

WHEN TO CALL 911

Call 911 immediately if you have the following symptoms:

- You have chest pain or trouble breathing
- Your lips or fingers are blue
- You feel drowsy, confused or agitated



SHORTNESS OF BREATH

- One of the most common symptoms for people living with COPD is shortness of breath or the feeling of breathlessness
- Breathlessness can occur when you exercise or engage in activity. Some people feel breathless most of the time
- Breathlessness can cause feelings of anxiety but there are things you can do to make it easier
 - Some people use a fan in front of their face to relieve this feeling
 - Breathing techniques
 - Positioning to reduce breathlessness

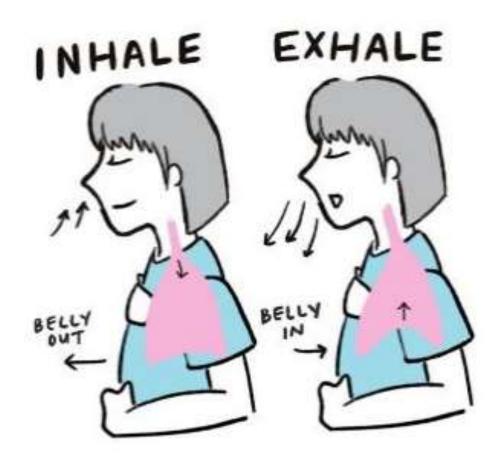
BREATHING TECHNIQUES

1.2 Inhale

Pursed-lip breathing

- 1) Keeping your mouth closed, breathe in slowly through your nose
- 2) Purse your mouth like you're blowing out candles or whistling
- 3) Keeping your lips pursed, breathe out slowly making sure this phase is longer than you did to breathe in





BREATHING TECHNIQUES

Diaphragmatic breathing or belly breathing:
1) Sit comfortably in a chair with relaxed shoulders
2) Place your hands on your stomach
3) Breathe in slowly through your nose allowing your stomach to rise under your hands

4) Breathe out slowly through pursed lips, feeling your stomach fall back to its normal position

5) Wait after each exhalation until you are ready to take another deep breath

POSITIONING TO REDUCE BREATHLESSNESS



Sitting

Sit comfortably in a chair and place both feet on the ground

Lean your head and shoulders forward slightly

With your arms relaxed, rest your arms on your knees

POSITIONING TO REDUCE BREATHLESSNESS

Standing

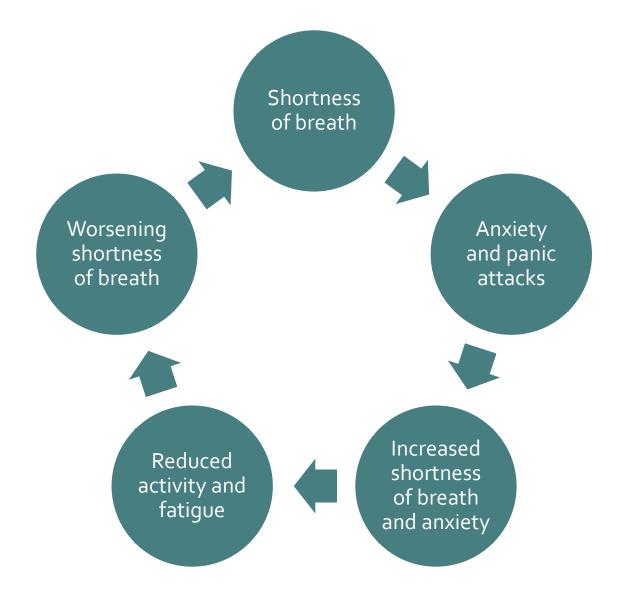
- 1) Lean your back against a wall, chair or counter (make sure it's stable)
- 2) Move your feet so they are slightly apart
- 3) Lean your head and shoulders forward slightly while staying relaxed
- 4) Rest your hands on your thighs or a piece of furniture



ENERGY CONSERVATION

Prioritize	Prioritize your activities
Plan	Plan your schedule ahead, make sure it's within your limits
Pace	Pace yourself
Position	Position your body and environment to decrease breathlessness
Use	Use pursed-lip breathing when exerting yourself
Try	Try to maintain a positive attitude

COPD AND ANXIETY THE ANXIETY-BREATHLESSNESS CYCLE



Coping with Anxiety

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DEEP BREATHING

Pursed lip breathing

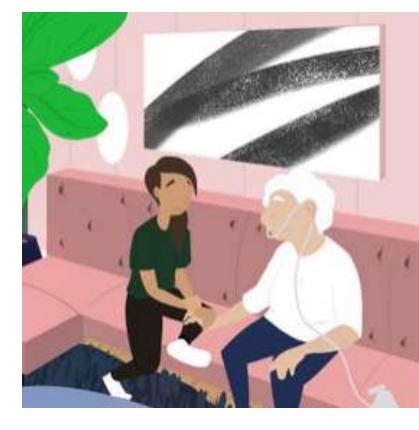
Belly breathing

COPING WITH ANXIETY

Stressful emotions may cause you to feel short of breath

While this may feel uncomfortable, there are ways to cope with anxiety caused by difficult emotions:

- Try to plan ahead and avoid situations that may cause stress
- If you are unable to avoid these situations, make plans to reduce stress as much as possible
- If you do become anxious and short of breath, find a comfortable place to sit and begin pursed lip breathing
- Speak with your support system about situations that cause stress. This will provide them with the knowledge needed to support you
- Consider mental health counselling for anxiety



COPD AND EXERCISE

- Exercise is one of the most important things you can do to manage your COPD
- While it may seem easier to take it easy, this can worsen your breathing in the long-term
- Exercise can help improve your energy level and help you breathe better



BENEFITS OF EXERCISE

When you are less physically active, your muscles, including your heart, become less efficient.

Your muscles work harder causing you to feel more breathless and tired

Exercising regularly can strengthen your muscles and help your heart and lungs work more efficiently

As a result, you'll be able to do more with the same amount of effort

Exercise also helps to maintain a healthy weight, helps your body fight off infections, improve your energy level and mood

COPD AND EXERCISE Exercise does not have to be complicated

Starting slow and pacing your activity is important

As you get stronger, you can do a bit more or exercise a little longer

Walking is a good and simple way to improve your fitness

Speak with your primary healthcare provider before starting an exercise program to make sure it is appropriate for you. You can also discuss when to use your inhalers

You can also speak with your doctor about pulmonary rehab to see if it's appropriate for you

WHAT IS CHRONIC DISEASE?

COPD is known as a chronic disease

This means that COPD is a long-term condition that will worsen over time

COPD is not curable, but there are ways to slow this progression

There can be periods of wellness and periods of illness with severe symptoms

WHAT IS ADVANCE CARE PLANNING? A time for you to think about what is important to you if you were sick or injured and could not speak for yourself

It is important to choose a **Substitute Decision Maker** - the person who can speak for you if you are unable to speak for yourself - let him or her know your wishes and the type of care you want and do not want.

Why is this so important? It can be difficult for others to make decisions for you if they don't know your wishes or your values

WHEN SHOULD I TALK ABOUT ADVANCE CARE PLANNING?

- Everyone should do advance care planning as soon as possible. Especially when you are healthy and able to have these conversations.
- You can talk about your wishes at any point. After a hospital visit or a flare-up of your chronic condition may be a perfect time.
- You can write down your wishes or make an audio or video recording and can change it at any time.

ADVANCE CARE PLANNING

Find out more:

- Speak with your healthcare provider or one of our community partners who specialize in advance care planning.
- Visit www.advancecareplanning.ca

Talk to Your Health Care Provider about Advance Care Planning

What would happen if you were sick or injured and could not tell doctors what kind of care you wanted?

Who would speak for you and make decisions for you?



Thanks for Listening!

Please email questions about this webinar to: info@nfht.ca

COPD Resources

Resource	Website	Phone	Email
The Canadian Lung Association	www.lung.ca/copd	1-888-566-5864	info@lung.ca
Living Well with COPD	www.livingwellwithcopd.com		

Smoking Cessation Resources

Resource	Website	Phone	Email
NFHT Smoking Cessation program (only available to NFHT patients)	www.nfht.ca	289-252-2130	info@nfht.ca
STOP on the NET	www.nicotinedependence clinic.com/en/stop/stop- on-the-net	1-800-463-2338 ext 34455	stop.study@camh.ca

Advance Care Planning Resources

Resource	Website	Phone	Email
Ed's House Northumberland Hospice Care Centre	https://edshouse.northumberlandhospi ce.ca/education-awareness/	1-855-473-8875	hospiceservices@commc are.ca
Advance Care Planning Canada	www.advancecareplanning.ca		
Speak Up Ontario	https://www.speakupontario.ca/resourc es-for-individuals-and-families/	1-800-349-3111 ext 231	
Hospice Palliative Care Ontario	https://www.hpco.ca/advancecareplann ing/	1-800-349-3111	info@hpco.ca

Mental Health Resources

Resource	Website	Phone	Email
NHH Community Mental Health Walk In Counselling (ages 7 and up, available Tues 8am-4pm and Thurs 10am-6pm at 1011 Elgin St. W., Suite 200, Cobourg	https://nhh.ca/walk-in-counselling	905-377-9891 for general inquiries or 905-377-7784 to receive support from walk in counselling	
Bounceback (Ages 15 and up, free, guided, self-help program for mild-moderate anxiety or depression)	https://bouncebackontario.ca/	Referral from primary care provider or self- refer through Ontario Shores: 1- 877-767-9642	bb-referral@cmha-yr.on.ca
4-County Crisis (24 hr free, confidential crisis support)	https://cmhahkpr.ca/programs- services/four-county-crisis/	1-866-995-9933	

References

Canadian Lung Association. (2019). Chronic Obstructive Pulmonary Disease (COPD). Retrieved

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Living Well with COPD. (2016). *Living well with COPD: A plan of action for life.* Retrieved from

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