



Patient Health Guide: Chronic Obstructive Pulmonary Disease (COPD)

How can YOU stay healthy and out of the hospital?

- **Take your medicines as instructed by your doctor. This is very important to reduce your symptoms and prevent flares (or exacerbations).** Tell your doctor or pharmacist if:
 - You cannot pay for your medicine;
 - You have trouble taking your medicine;
 - Your medicine makes you feel worse; or
 - You are worried about the side effects of your medicine.
- **Wash your hands often.**
- Avoid close contact with people who have a cold or the flu.
- Get a flu shot every year, and ask your doctor when you should get a pneumonia shot.
- **Keep your follow-up appointments with your doctor even if you are feeling well.**
- If you smoke, quitting will make you healthier. If you do not smoke, do not start. Avoid being in the same room with other smokers.

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What is COPD?

- COPD is a condition where the tubes in the lungs (airways) are inflamed and narrowed, making it difficult to breathe because it is harder for your lungs to get oxygen.
- COPD is most commonly caused by smoking.
- Most people with COPD have chronic bronchitis (long-lasting cough with phlegm/mucus) and emphysema (damage to the air sacs in the lungs). Some also have asthma.

Your Symptoms

Understand **how** you are feeling and **what to do based on the Green, Yellow, and Red Zones below**. Ask questions to better understand how to manage your **COPD**.

Green Zone Symptoms:	“All Clear” Green Zone Means:
<ul style="list-style-type: none"> <input type="checkbox"/> No shortness of breath that is different for you <input type="checkbox"/> Usual amounts of cough and phlegm/mucus <input type="checkbox"/> Sleeping well or normal at night <input type="checkbox"/> Appetite is good/normal 	<ul style="list-style-type: none"> • Your symptoms are under control • Continue taking your medicines • Use your oxygen as prescribed (if applicable) • Avoid smoking & inhalation irritants • Keep all appointments with your doctor even if you feel well
Yellow Zone Symptoms:	“Caution” Yellow Zone Means:
<ul style="list-style-type: none"> <input type="checkbox"/> Increased coughing/phlegm/mucus <input type="checkbox"/> Medicine does not seem to be helping <input type="checkbox"/> Need to use an inhaler/nebulizer more often <input type="checkbox"/> Not sleeping well <input type="checkbox"/> You need to do “pursed lip” breathing <input type="checkbox"/> Have a poor appetite <input type="checkbox"/> Anything else unusual that bothers you related to COPD 	<ul style="list-style-type: none"> • Call your doctor to be seen as soon as possible • Your medicines may need to be changed • Use your oxygen as prescribed (if applicable) • Avoid smoking & inhalation irritants
Red Zone Symptoms:	“Medical Alert” Red Zone Means:
<ul style="list-style-type: none"> <input type="checkbox"/> Shortness of breath while at rest <input type="checkbox"/> Chest pain <input type="checkbox"/> Not able to do any activity due to difficulty breathing <input type="checkbox"/> Need to sit in a chair to sleep or unable to sleep <input type="checkbox"/> Feeling confused or drowsy <input type="checkbox"/> Coughing up blood <input type="checkbox"/> Have a fever or chills/shaking 	<ul style="list-style-type: none"> • You need immediate or urgent evaluation • Call 911 or have someone drive you to the Emergency Room

NOTES

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Common Medicines Used to Treat COPD

Medicine Type and Reason for Use	Examples	Possible Side Effects
Bronchodilators: Beta Agonists Relaxes muscles in the lungs	Short-Acting “Rescue” Medicine: <input type="checkbox"/> Albuterol inhaler or nebulizer (ProAir®, Proventil® or Ventolin®) <input type="checkbox"/> Levalbuterol nebulizer (Xopenex®) Long-Acting “Controller/Maintenance” Medicine (NOT a “Rescue” medicine): <input type="checkbox"/> Salmeterol inhaler (Serevent®) <input type="checkbox"/> Formoterol inhaler (Foradil®) <input type="checkbox"/> Aformoterol inhaler (Brovana®) <input type="checkbox"/> Other _____	<ul style="list-style-type: none"> • Fast heart beat • Feeling nervous • Muscle cramps • Shakiness
Bronchodilators: Anticholinergics Helps lungs work better over time and helps reduce COPD “flares”	<input type="checkbox"/> Ipratropium inhaler or nebulizer (Atrovent®) <input type="checkbox"/> Tiotropium inhaler (Spiriva®)—pill is put into inhaler <input type="checkbox"/> Other _____	<ul style="list-style-type: none"> • Difficulty urinating • Dry cough or dry mouth
Beta Agonist + Anticholinergic Combination	<input type="checkbox"/> Albuterol + Ipratropium inhaler or nebulizer (Combivent® or DuoNeb®)	<ul style="list-style-type: none"> • Dry mouth • Fast heart beat • Shakiness
Other Long-Acting Combinations	<input type="checkbox"/> Glycopyrrolate + formoterol (Bevespi Aerosphere®) <input type="checkbox"/> Tiotropium + olodaterol (Stiolto Respimat®) <input type="checkbox"/> Other _____	<ul style="list-style-type: none"> • Dry cough or dry mouth • Fast heart beat
Glucocorticoid (Steroid* inhaler) Helps reduce lung inflammation <small>*NOT the same as steroids misused by athletes.</small>	Long-Acting “Controller/Maintenance” Medicine (NOT a “Rescue” medicine): <input type="checkbox"/> Fluticasone inhaler (Flovent®) <input type="checkbox"/> Budesonide inhaler (Pulmicort®) Long-Acting Broncodilator + Glucocorticoid Combination Inhaler: <input type="checkbox"/> Salmeterol + Fluticasone inhaler (Advair®) <input type="checkbox"/> Formoterol + Budesonide inhaler (Symbicort®) <input type="checkbox"/> Other _____	<ul style="list-style-type: none"> • Scratchy or hoarse voice • Sore mouth or throat • Infections in mouth or throat
Other medicines that might be used for COPD	<input type="checkbox"/> Glucocorticoid (steroid*) by mouth or IV (Methylprednisolone, Prednisolone, or Prednisone) <input type="checkbox"/> Roflumilast (Daliresp®) pill by mouth <input type="checkbox"/> Antibiotics for bronchitis or pneumonia _____ <input type="checkbox"/> Other Medicines: _____ _____	Talk to your pharmacist about how to take your medicines correctly, especially your inhalers.

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