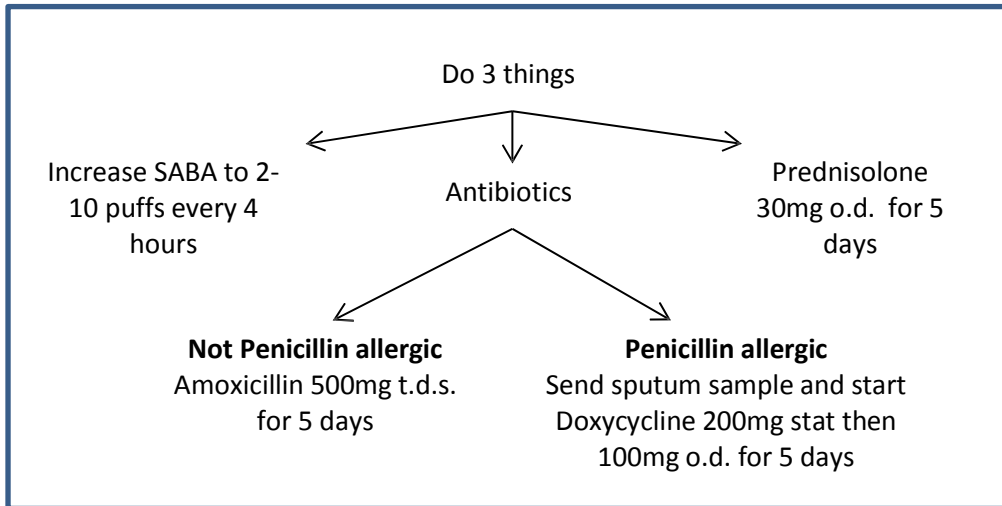


MANAGEMENT OF ACUTE EXACERBATION OF COPD

Check your patient has an exacerbation

An exacerbation is defined as 2 of the following 3 criteria (for 2 days or more).

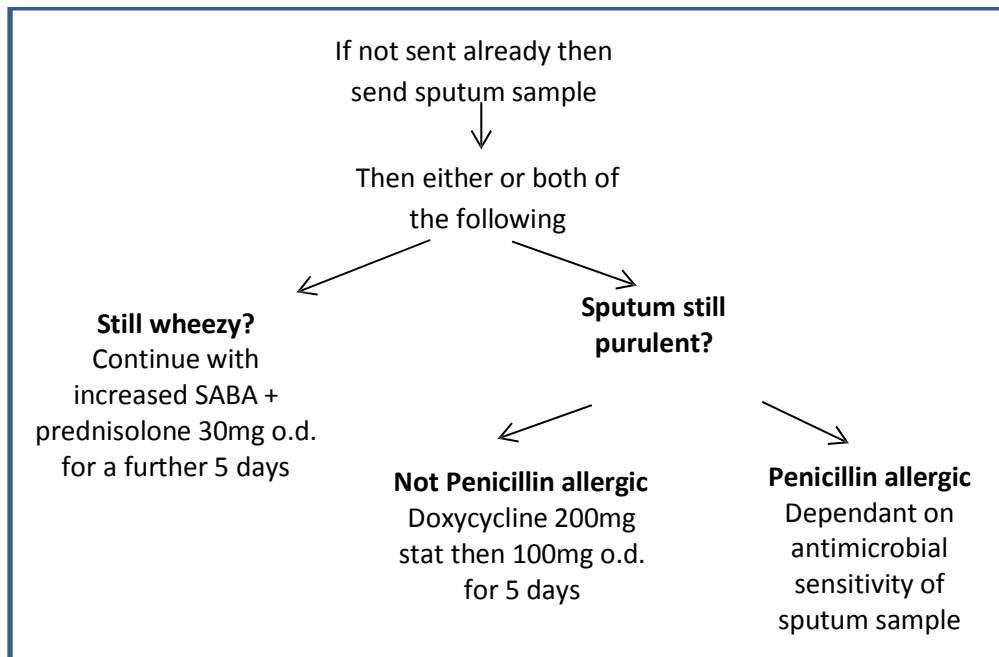
- A. Increased breathlessness
- B. Increased sputum volume
- C. Increased sputum purulence



Important Points

- Check previous sputum sample results for previous bacterial growth and any evidence of resistance

If no better after 7 days or patient represents within 4 weeks



Important Points

- There is no role for prolonged or weaning courses of Prednisolone

If still no better and cause not apparent from sputum sample

The patient needs a review with General Practitioner and consideration of a Chest x-ray

Preventing future exacerbations

- A. Refer patient to Pulmonary Rehabilitation
- B. If using high dose inhaled corticosteroids (>800mcg Beclomethasone / day or equivalent) this should be reduced in line with the COPD Inhaler Decision Tool
- C. "Emergency / Rescue packs" of antibiotics and steroids are not recommended unless the patients has completed Pulmonary Rehabilitation.
- D. The use of more than 3 emergency / rescue packs in any calendar year should prompt a review with either the practice nurse or GP.