

R.E.A.C.H. Approach to COPD patients:

- Assessment – Diagnosis correct? MRC score, CAT score, O2, Co-morbidities
- Smoking status and cessation advice
- Pulmonary rehabilitation (if suitable & MRC 3 or more) & Exercise
- Inhaler technique (EVERY opportunity), preferred choice & compliance
- Immunisations (Flu? Pneumonia?)
- Refer for tests (Chest x-ray? Full blood count, ECHO, CT scan)/ consultant opinion?
- Exacerbation (AECOPD) training – patient education, self-management, review

MRC Dyspnoea scale

- MRC1** = Not troubled by breathlessness except on strenuous effort
- MRC2** = Short of breath when hurrying on a level or when walking up a slight hill
- MRC3** = Walks slower than most people on the level, stops after a mile or so, or stops after 15 minutes walking at own pace
- MRC4** = Stops for breath after walking 100 yards, or after a few minutes on level ground
- MRC5** = Too breathless to leave the house, or breathless when dressing/undressing

CAT SCORE – impact questionnaire – score/40. Higher the score, the higher impact
 Free access to Score sheets at: www.catestonline.org

Patients can start in ANY group, and change between groups, therefore REGULAR assessment required. Check correct inhaler technique at EVERY opportunity
SABA- short acting B2 agonist **SAMA-** short acting muscarinic antagonist **LABA-** long acting B2 agonist **LAMA-** long acting muscarinic antagonist **ICS-** inhaled corticosteroid

Patient Group	Symptoms & Risk	Symptoms		Exacerbation (AECOPD) history (in last 12 months)	Basic treatment	Add-on treatment	Comments
		CAT score	MRC				
GOLD-A	Fewer symptoms Low risk	< 10	1-2	≤1 exacerbation 0 hospital admissions	SABA (or SAMA)	Symptomatic: SABA & LAMA or SABA & LABA	SAMA as alternative for those where benefit is limited from SABA or who cannot tolerate SABA
GOLD-B	More symptoms Low risk	≥ 10	≥ 3	≤1 exacerbation 0 hospital admissions	SABA & LAMA or SABA & LABA	Symptomatic: SABA & LAMA/LABA (combi)	Clinical trial data stronger for LAMA than LABA
GOLD-C	Fewer symptoms High risk	< 10	1-2	≥2 exacerbations or ≥1 hospital admissions	SABA & LAMA	Symptomatic: SABA & LAMA/LABA (combi)	Or ICS/LABA (combi), but ICS increases risk of pneumonia
GOLD-D	More symptoms High risk	≥ 10	≥ 3	≥2 exacerbations or ≥1 hospital admissions	SABA AND LAMA/LABA (combi)	Symptomatic: SABA & ICS/LABA/LAMA	Or switch to ICS/LABA (combi), but no evidence of better prevention of exacerbations

MDI= metered dose inhaler (Technique- SLOW & STEADY) consider addition of a spacer if not correct; DPI – dry powder inhaler (Technique- DEEP & FAST) EMIS picking inhaler name is highlighted in RED

	SABA (short acting B2 agonist)	SAMA (short acting muscarinic antagonist)	LAMA (long acting muscarinic antagonist)	LABA (long acting B2 agonist)	LAMA/LABA combination (long acting muscarinic antagonist with long acting B2 agonist)	ICS/LABA combination (inhaled corticosteroid with long acting B2 agonist)	ICS/LABA/LAMA combination 'Triple' inhaler (Check SPC for licensed indication)
First choice MDI inhaler (use SLOW & STEADY)	Salbutamol 100mcg/dose inhaler CFC free 1-2 puffs up to QDS PRN	Iprratropium bromide 20mcg/dose inhaler CFC free 1-2 puffs up to QDS PRN	Spiriva Respimat® 2.5mcg/ dose cartridge with device (Tiotropium) 2 puffs OD (Caution if eGFR<50)	Atimos Modulite® 12mcg/dose inhaler (Formoterol) 1-2 puffs BD	Spiolto Respimat®▼ 2.5mcg /dose/2.5mcg/ dose inhaler (tiotropium/olodacterol) 2 puffs OD (caution if eGFR<50)	Symbicort® 200mcg/dose/ 6mcg/dose pressured inhaler (budesonide/formoterol) 2 puffs BD	Trimbow® 87mcg/dose/5mcg/dose /9mcg/dose (Beclometasone/Formoterol/ Glycopyrronium) 2 puffs BD
First choice DPI inhaler (use DEEP & FAST)	Easyhaler® Salbutamol sulphate 100mcg/dose dry powder inhaler 1-2 puffs up to QDS PRN	None available	Incruse Ellipta®▼ 55mcg /dose dry powder inhaler (Umeclidinium bromide) 1 puff OD (no eGFR restriction)	Formoterol Easyhaler® 12mcg /dose dry powder inhaler 1 puff BD	Anoro Ellipta®▼ 55mcg/dose /22mcg/dose dry powder inhaler (Umeclidinium and vilanterol) 1 puff OD (no eGFR restriction)	Relvar Ellipta®▼ 92mcg /dose/ 22mcg /dose dry powder inhaler (fluticasone furoate/vilanterol) 1 puff OD	Trelegly Ellipta®▼ 92mcg/dose/55mcg/dose /22mcg/dose (Fluticasone furoate/ Umeclidinium/Vilanterol) 1 puff OD (no eGFR restriction)