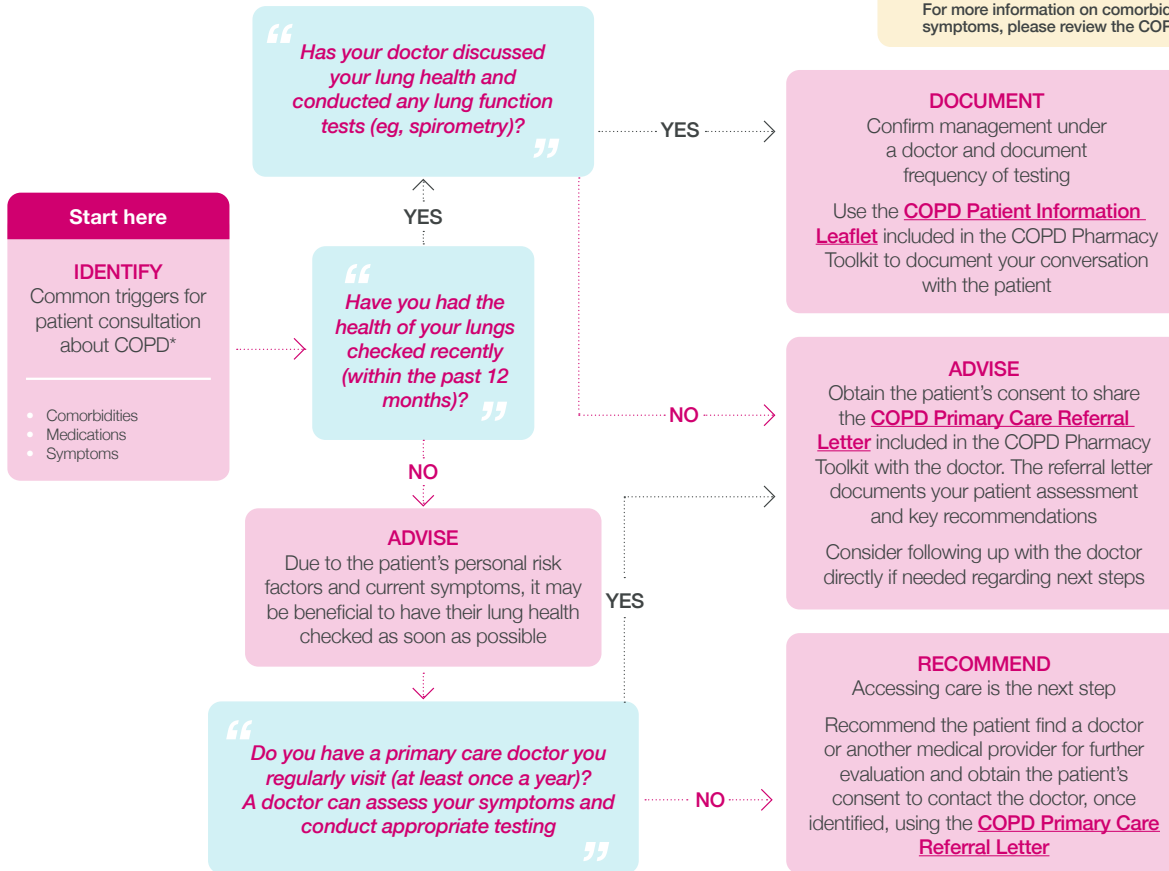


# COPD Development Risk Assessment Tool

## Assessment of adult patients at risk

This tool is designed for pharmacists to help them provide a standardised patient-pharmacist conversation flow to support identification of those who may be at risk of developing COPD. Counselling and education are focused on risk factors for the development of COPD, importance of reporting symptoms to aid prompt diagnosis, and managing COPD risk.

Offer the patient a private space to sit and talk



### Triggers for patient consultation about risk of developing COPD\*



#### Comorbidities<sup>1</sup>

eg, hypertension, heart failure, ischaemic heart disease, asthma, depression, anxiety, osteoporosis

\*Common patient consultation triggers, not an exhaustive list.

For more information on comorbidities, medications, and symptoms, please review the COPD eLearning module.



#### Medications<sup>1</sup>

eg, long-acting beta 2 agonists (LABAs) long-acting muscarinic antagonists (LAMAs), inhaled corticosteroids (ICSs), oral glucocorticoids, antibiotics



#### Symptoms<sup>1</sup>

eg, dyspnoea (breathlessness), chronic cough, sputum production, wheezing, chest tightness, fatigue

### Suggested counselling points for at-risk patients<sup>1,2</sup>

- Encourage your patients to quit smoking at every opportunity. Guide them to resources to help them quit
- Educate patients on the benefit of prescription and nonprescription pharmacotherapy, which have been shown to increase cessation rates
- Discuss the benefits of vaccination, review possible barriers, and partner on potential solutions
- Advise patients to stay up to date on vaccinations, as per local immunisation practice
- Promote physical activity to all patients. Review ways to incorporate various forms of physical activity into their daily routine
- Advise patients to wear a mask to minimise exposure to environmental hazards (smoke, air pollution, chemicals, airborne germs)
- Counsel patients to take medications regularly as prescribed and to discuss over-the-counter medicines with their doctor or pharmacist

### Patient Information leaflet | Document patient conversation

- Complete the information leaflet to summarise the conversation with the patient
- Use the document to review disease risk factors, importance of reporting symptoms, and ways to reduce risk
- Check off applicable boxes and add any additional details in the notes section
- Sign and date the document and share it with the patient
- Share the leaflet with your patient during counselling as a visual aid to the conversation or provide following the counselling

NRT, nicotine replacement therapy; RSV, respiratory syncytial virus.

1. Global Initiative for Chronic Obstructive Lung Disease (GOLD). Global strategy for the diagnosis, management, and prevention of chronic obstructive pulmonary disease (2024 report). Available at: <https://goldcopd.org/2024-gold-report>. Accessed August 2024.

2. Global Allergy and Airways Patient Platform (GAAPP). Empowerment guide for patients with COPD. Available at: [https://gaapp-images.s3.amazonaws.com/wp-content/uploads/2021/09/31235059/ENG\\_COPD\\_empGuide\\_SV.pdf](https://gaapp-images.s3.amazonaws.com/wp-content/uploads/2021/09/31235059/ENG_COPD_empGuide_SV.pdf). Accessed August 2024.

These materials are created to support pharmacists in their interactions with patients and do not take into account a particular jurisdiction. The role and the responsibilities which a pharmacist can legitimately perform vary from one country to another. If you consider using these materials in full or in part, please ensure you understand and adhere to the legal and regulatory requirements in your country, including but not limited to the National Drug Act, data privacy legislation, professional code of conduct and any other. If you are interested in receiving a localised version for your country, which is compliant with the local rules and regulations, please contact us.

These materials were commissioned and funded by AstraZeneca. AstraZeneca have provided an educational grant to FIP to raise awareness and dissemination of this toolkit in line with FIP's mission to advance pharmacy worldwide.

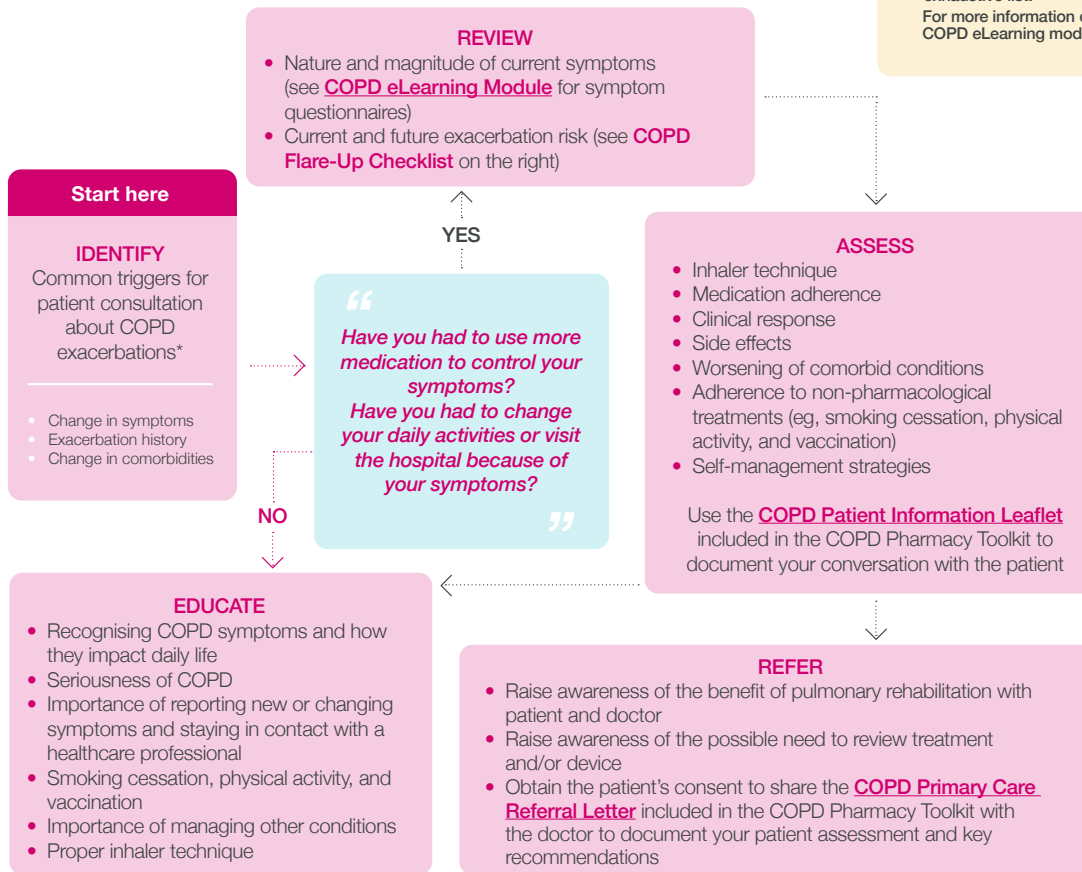
This material is intended for pharmacists with an interest in respiratory disease.

# COPD Exacerbation Risk Assessment Tool

## Assessment of adult patients with COPD

This tool is designed for pharmacists to help them provide a standardised patient-pharmacist conversation flow to support the monitoring and assessment of COPD symptoms. Reducing the risk for disease progression is critical. Using this tool to monitor changes in COPD symptoms may help minimise the negative impact of COPD exacerbations and reduce the risk of subsequent events.

Offer the patient a private space to sit and talk



### Triggers for patient consultation about patients' COPD exacerbations\*



#### Change in symptoms<sup>1,2</sup>

eg, worsening of dyspnoea, chronic cough, sputum production, wheezing, chest tightness, fatigue

\*Common patient consultation triggers, not an exhaustive list.  
For more information on COPD, please review the COPD eLearning module



#### Exacerbation history<sup>2</sup>

eg, ≥2 moderate exacerbations (treated with short-acting beta 2 agonists (SABAs) and oral corticosteroids, with or without antibiotics) or ≥1 exacerbation leading to hospitalisation in the past year



#### Change in comorbidities<sup>1,2</sup>

eg, worsening of hypertension, heart failure, ischaemic heart disease, depression, anxiety, osteoporosis

### COPD Flare-up Checklist<sup>3</sup> | Identification of a COPD exacerbation in the past year

- In relation to your symptoms, how often do you use a rescue medication (inhalers or nebulisers) each week?**

Never/rarely     Once or twice a week     Most days     Every day
- How many times have you taken antibiotics for your COPD in the past year?** If you are prescribed antibiotics as part of your regular maintenance treatment for COPD, you should only answer this question for courses of antibiotics in addition to your repeat prescriptions.
 

Never/not sure     1     2     3+
- How many times have you taken steroid tablets (eg, prednisolone) for your COPD over the past year?** If you are prescribed steroid tablets as part of your regular maintenance treatment for COPD, you should only answer this question for courses of steroid tablets prescribed in addition to your repeat prescriptions.
 

Never/not sure     1     2     3+
- How many times have you been in the hospital (emergency room, or a stay in the hospital) for your COPD in the past year?**

Never/not sure     1     2     3+

A patient's exacerbation history is the best way to predict their future risk.

Question 1: Frequent rescue inhaler use may indicate that your symptoms are getting worse.

Questions 2-4: If you answered "1," or more, to any of these questions, you may have had a flare-up of COPD in the past year. It's important to discuss this with your doctor.

1. Hurst JR et al. *Eur J Int Med.* 2020;73:1-6.

2. Global Initiative for Chronic Obstructive Lung Disease (GOLD). Global strategy for the diagnosis, management, and prevention of chronic obstructive pulmonary disease (2024 report). Available at: <https://goldcopd.org/2024-gold-report>. Accessed August 2024.

3. AstraZeneca. COPD Flare-Up Checklist. Available at: <https://www.actoncopd.com/content/dam/intelligentcontent/brands/breztri/actoncopd-global/pdf/Flare-Up-checklist-new.pdf>. Accessed August 2024.

These materials are created to support pharmacists in their interactions with patients and do not take into account a particular jurisdiction. The role and the responsibilities which a pharmacist can legitimately perform vary from one country to another. If you consider using these materials in full or in part, please ensure you understand and adhere to the legal and regulatory requirements in your country, including but not limited to the National Drug Act, data privacy legislation, professional code of conduct and any other. If you are interested in receiving a localised version for your country, which is compliant with the local rules and regulations, please contact us.

These materials were commissioned and funded by AstraZeneca. AstraZeneca have provided an educational grant to FIP to raise awareness and dissemination of this toolkit in line with FIP's mission to advance pharmacy worldwide.

This material is intended for pharmacists with an interest in respiratory disease.