IMPRESS Pulmonary Rehabilitation Guide

A new guide for commissioners and providers of pulmonary rehabilitation services (PR) as part of an integrated COPD service is now available from Impress, a joint initiative of the British Thoracic Society and Primary Care Respiratory Society-UK. Click here to read the document.

The guide discusses evidence for the impact of PR on mortality, admissions, readmissions and bed days. It covers costs and value for money of commissioning PR. The document outlines example Key Performance Indicators that commissioners should expect their providers to collect.

The appendices give an example service and an example dashboard for the reporting of outcomes.

This document is designed to support the Pulmonary Rehabilitation Commissioning Pack, due to be published by the Department of Health early in 2012.

Win a bottle of bubbly!

This is our 10th Edition of Breathing Matters and to celebrate we are giving away a bottle of bubbly to one lucky winner! All you need to do is answer a few short questions about Breathing Matters and your name will be automatically entered into the draw. William Roche, Medical Director for NHS South of England (East) has kindly agreed to draw the winning name.

Entries close on Friday 20th January 2012 and the winner will be notified by 31st Jan.

Click here to enter the competition.
We have had so much valuable correspondence following November’s edition of Breathing Matters we thought it would be worth printing some of it. We really welcome your comments, thoughts and corrections, so stay in touch with us!

Email: Rachel Collins

@SECRespiratory

Staying in touch

Pre Hospital Emergency Oxygen
Julia Bott, Nov 2011, 9th Edition

Dear William [Roche], (SHA Medical Director)

I was delighted to see the article on emergency oxygen in the ambulance service.

I am one of the team who published last year’s Cochrane Review on oxygen in MI and am leading an HTA application to undertake a trial in the ambulance setting to try and address this ongoing uncertainty.

SIGN updated their ACS guideline (as did the European Resuscitation Council) in response to our Cochrane report and I am hoping NICE will also do so in the forthcoming STEMI guideline.

I’m working closely with Andy Newton and his team at SECamb and am a member of JRCALC, so hope to help influence the changes in oxygen use by ambulance services for the future.

BW

Tom

Professor Tom Quinn FRCN FESC FAHA
Professor of Clinical Practice
Faculty of Health and Medical Sciences
University of Surrey, UK.
Clinical Lead, NHS Evidence
National Institute for Health and Clinical Excellence.

Please follow this link to the University Press Release and a short video.

All that Wheezes is not COPD: Other Obstructive Disorders;
Jo Congleton, Nov 2011, 9th Edition

Dear Jo

Thank you for the latest edition and just to show I have read it you haven't mentioned cardiac causes of ‘wheezing’. Setting aside acute LVF, possibly about as rare as obliterative bronchiolitis of course. I have certainly seen mitral stenosis treated with inhalers!

Dr David Maxwell, Consultant Physician
Eastbourne District General

Dear David

This is a really important point and I agree that good old fashioned ‘Cardiac Asthma’ is often mis-diagnosed and I think it is much more common that obliterative bronchiolitis. A reminder that the two important organs the chest are not the right lung and the left lung but the lungs and the heart!

Jo
Dear Jo,
In your breathing matters table about airways disease; it says 'must' have a smoking history for COPD, but I tell my juniors and nurses that around 10% (or more) of COPD patients don't have a smoking history.

David Ross,
Consultant Physician, Western Sussex Hospitals Trust

Dear David,

There seem to be two camps here. There are many people who would use the term COPD for people with permanent airflow obstruction who do not have a significant smoking history. Personally I feel that COPD consists of large airway inflammation, small airway fibrosis and narrowing and emphysema occurring to varying degrees in each patient, and that this is caused by inhalation of noxious gases. In the UK in the 21st century these gases are inhaled from cigarettes. But other agents have the capacity to cause this change. In the developing world wood as fuel cooking is an important cause which, as you may expect, affects women more than men. The NICE Guidelines state that 'COPD is predominantly caused by smoking. Other factors, particularly occupational exposures, may also contribute to the development of COPD'. I prefer not to use the term COPD for fixed airflow obstruction in never smokers as I feel the pathology and physiology differs, particularly in that they do no have the emphysema component. It's a question of semantics and both views are valid.

Jo

What were you doing on 16th November?

World COPD Day is a global event organised annually by GOLD (Global Initiative for Chronic Obstructive Lung Disease). The event aims to raise awareness of COPD, not just for the millions of diagnosed patients who are living with the disease, but also to try and capture those who are undiagnosed, to help them recognise their symptoms and to receive a diagnosis.

Research confirms that an early diagnosis and the instigation of appropriate medication and lifestyle changes will lead to a better quality of life for patients and can even slow down the progression of this disease.

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Clair Gough, Sally Gafney, Melanie Webber, Rebecca Bunn, Sheilagh McCrossan, Deborah Cearns and Sharon Stanbrook from the Dover Specialist Respiratory Team were on hand outside Sainsbury’s offering symptom advice, FEV1 (Forced Expiratory volume over 1 second) breath tests, leaflets and advice on inhaled medications. The team really enjoyed meeting the local community and were able to encourage those requiring a referral to contact their GP or the Specialist Respiratory Team.

In other parts of East Kent: “We also undertook COPD6 Spirometry screening and lung health questionnaires at Boots stores in Canterbury and Ashford with members of the local Breathe Easy groups. In Ashford 18 people were screened and this generated 5 abnormal results and subsequent liaise with GPs.”

For more information contact Pauline Treadwell
Test your knowledge with The Christmas Quiz!!

There are no prizes for this quiz, it’s just for fun. Answers are on Page 5 - No cheating! Tell us how you have done via Twitter @SECRespiratory.

1. If my CXR shows candle wax and holly leaves what job might I have done?
   a. French Polisher
   b. Plumber
   c. Mushroom Picker
   d. Farrier

2. Who is the odd one out and what connects the other 3?
   a. George Orwell
   b. Franz Kafka
   c. Tom Jones
   d. Charles Dickens

3. Which of these invented a very early non-invasive ventilator?
   a. Christopher Cockerell
   b. James Dyson
   c. Graham Alexander Bell
   d. Leonardo da Vinci

4. How much was spent on inhaled steroids in SEC SHA in 2010?
   a. £45,000
   b. £450,000
   c. £4,500,000
   d. £45,000,000

5. Match the person with the Nationality:
   a. Henry Heimlich (Valsalva maneuver)
   b. Wilhem Roentengen (Father of Xrays)
   c. Christian Bohr (Described Bohr effect)
   d. Roger Altounyan (Inventor of sodium chromoglicate)
   i. American
   ii. German
   iii. Danish
   iv. Armenian

6. If I have smoked 10 cigarettes a day age 18 to 28 then a pack of 20 a day until age 43 how many pack years have I smoked?
   a. 20
   b. 35
   c. 40
   d. 45

7. How many admissions for acute exacerbation of COPD were there in 2010/11 in SEC Region?
   a. 6,327
   b. 7,502
   c. 8,106
   d. 10,210

8. How many people are estimated to have COPD in England?
   a. 0.8 million
   b. 3.2 million
   c. 4.3 million
   d. 2.1 million

9. Where would you find these items: A Cornet, An Acapella, And a Flutter?
   a. In the interventional bronchoscopists equipment box
   b. In the physiotherapists cupboard
   c. In the ‘Sing For Your Life’ repertoire
   d. In the lung function lab

10. What type of respiratory clinician was this man?
    a. Physiotherapist
    b. Physiology technician
    c. Allergist
    d. Thoracic Surgeon

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Protect yourself, your family and your patients - be a flu fighter

www.nhsemployers.org/flu
These are classic appearances of benign asbestos related pleural plaques. In the past plumbers often had a significant asbestos exposure. The Christmas Quiz: Answers!

We try to keep our distribution list as up to date as possible.

If you would like to subscribe or unsubscribe from Breathing Matters or your role has changed and you would like to let us know, please email Rachel Collins

Contact for further information:

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