



**Attach Patient Addressograph**

**Exacerbations of COPD** are frequent among patients with COPD at any stage. The majority of patients report two or more a year. An exacerbation is described as:

*‘a sustained worsening of your symptoms from your usual stable state, which is beyond normal day to day variations’*

**Some triggers that can cause an exacerbation include:**

- Weather changes – e.g. cold spells, muggy or close.
- Viral epidemics – in particular winter influenza epidemics
- Exposure to a smoky environment
- High pollen levels

**How to prevent exacerbations**

- **Stop smoking** (if applicable)
- Eating a healthy diet – aim to keep your weight within the healthy range for you height
- Keep as fit and active as possible ensure you have the flu jab each year and a ‘one off’ pneumovax
- See your Practice or Respiratory Nurse regularly to ensure your inhaler technique is correct and that you are on the most appropriate treatment.

**Symptoms include:**

- Worsening breathlessness
- Cough
- Increased sputum production
- Changes in sputum colour
- Changes in ability to carry out daily activities
- Wheeze

The change in these symptoms, usually necessitates a change in medication.

**Prompt treatment is important!**

**Action to be taken *during exacerbation:***

If not already doing so; increase your blue inhaler to:

.....

Use your spacer to ensure maximum effect.

Inhaler technique checked

Comments: If you have ‘standby medication’ at home start taking them at the dose agreed by your GP, Consultant or Respiratory nurse

Antibiotic: .....

Steroids: .....

If there is no improvement within 48 hours

**YOU MUST SEE YOUR GP OR GO TO HOSPITAL.**

If you do not have standby medication, and increasing your blue inhaler does not improve symptoms – **YOU MUST SEE YOUR GP AS SOON AS POSSIBLE.**