

Diagnostic Pathway for COPD

History suggestive of COPD

- Progressive persistent dyspnoea worsening with exercise
- Chronic cough usually productive but may be intermittent or non-productive "Winter bronchitis"
- Significant smoking history
- Family history of COPD



Spirometry

- Post bronchodilator FEV1/FVC <70% = COPD



Assess Disease Severity

1. Spirometric
 - Mild FEV1 > 80% predicted
 - Moderate FEV1 80-50% predicted
 - Severe FEV1 <50% predicted
 - Very severe FEV1 <30%
2. Functional : MRC scale (MRC = Medical Research Council)
 - MRC1 dyspnoea on strenuous activity
 - MRC2 dyspnoea on inclines
 - MRC3 walks slower than peers
 - MRC4 dyspnoea at 100m or after a few minutes
 - MRC5 too dyspnoeic to leave house/ dyspnoea washing or dressing
3. Functional : CAT score (CAT= COPD Assessment Test)
 - ≥10 indicates a severe burden of symptoms
4. Exacerbation history
 - 0-1 not leading to hospital admission
 - >2 or 1 leading to hospital admission
5. Assessment of comorbidities
 - Systemic effects of COPD - weight loss, sarcopenia
 - Cardiovascular disease
 - Osteoporosis
 - Depression
 - Lung cancer

Specialist Management Pathway for COPD

All patients:

Smoking cessation	Self-management plan	Influenza vaccination	Assess BMI/nutrition	Treat comorbidities	Medical therapies
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Consider:

Pulmonary Rehabilitation (PR) if MRC >3 / CAT>10
Repeat every 12-18 months

Cognitive Behavioural Therapy (CBT) if anxiety / breathless attacks / admission

Specialist referral:

Oximetry / oxygen assessment if FEV<30%, SATs \leq 92% +/- polycythaemia
+/- cor pulmonale +/- admission

Consider trial Domiciliary NIV
if 2+ episodes acute NIV

LVRS MDTM

End of life care:

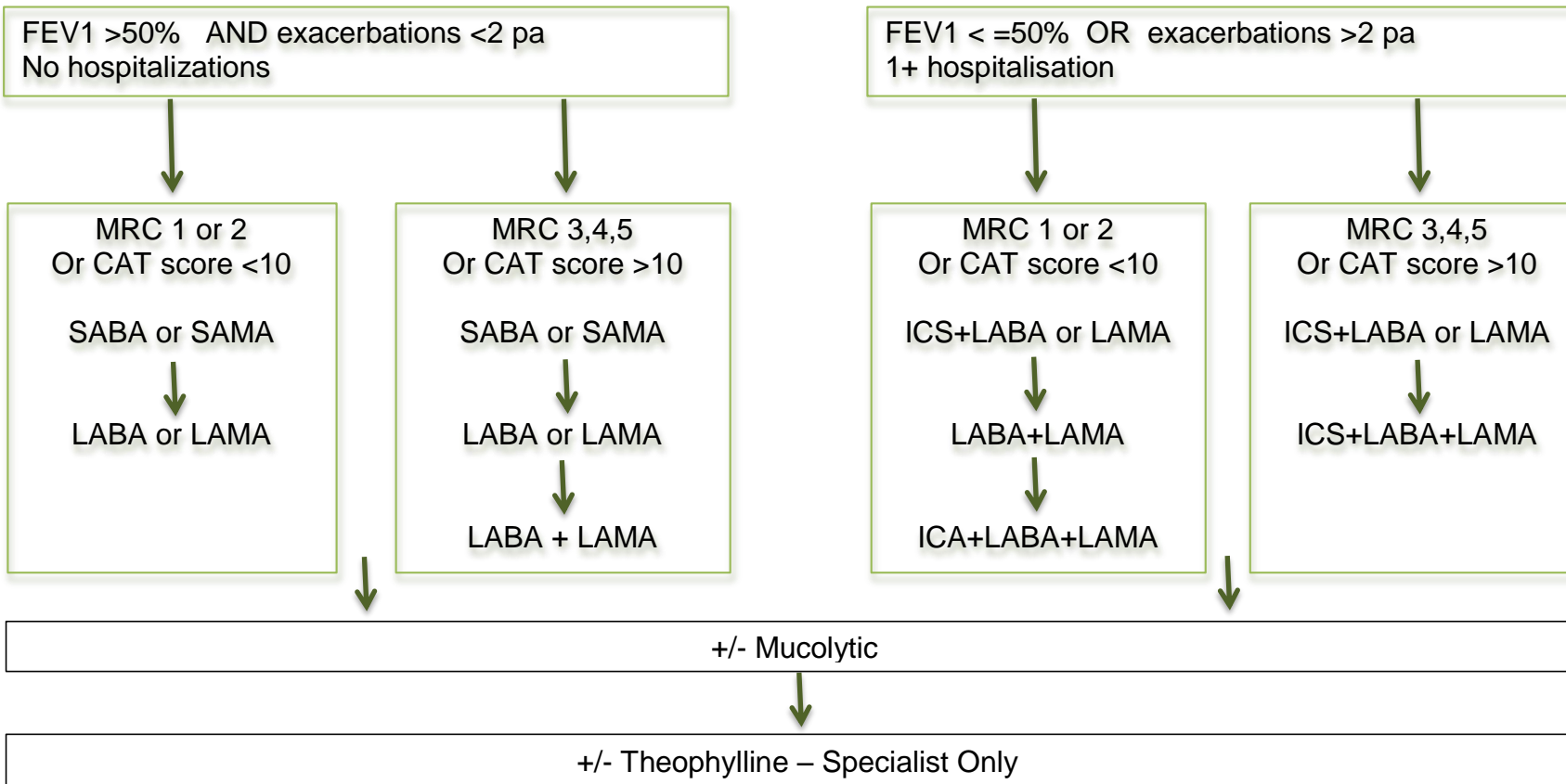
Palliative care/DNAR, especially consider if with:

- MRC 5
- Low BMI
- FEV1< 30%

Medical Therapy for COPD

- Trial for up to 8 weeks, then -
 - Ask patient: Are you less breathless? Can you do more? Do you sleep better?
 - Consider using CAT score

Check
inhaler
technique
at EVERY
review



SABA: Short-acting b2 agonist
LABA: Long-acting b2 agonist
ICS: Inhaled corticosteroids

SAMA: Short-acting antimuscarinic
LAMA: Long-acting antimuscarinic

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for each medicine class](#)