

OREGON FACT SHEET: COPD



LUNG HEALTH OF OREGON RESIDENTS

A 2011 survey performed by the Centers for Disease Control (CDC) found that 5.9% (age-adjusted = 5.4%) of Oregon residents reported having been told by a healthcare professional that they have COPD.¹

Oregon residents age 65 and above were most at risk for COPD. In addition, 58% of Oregon adults suffering from COPD were women.¹



KNOWING A PATIENT'S RISK FACTORS AND PROPER TESTING CAN DETECT COPD EARLIER

The goals of COPD assessment are to determine the severity of the disease, its impact on a patient's health status, and the risk of future events (exacerbations, hospital admissions, death) in order to guide therapy.

The Gold Initiative for Chronic Obstructive Pulmonary Disease (GOLD) guidelines are recognized as a benchmark for the diagnosis, assessment, and management of COPD.

GOLD GUIDELINES FOR COPD

Diagnosis and Assessment²

KEY INDICATORS for Considering a Diagnosis of COPD

- Dyspnea that is progressive over time; characteristically worse with exercise; persistent.
- Chronic cough.
- Chronic sputum production.
- Recurrent lower respiratory tract infections.
- History of risk factors.
- Family history of COPD and/or childhood factors.

ASSESSMENT of COPD

- Spirometry is required to make a diagnosis; the presence of a post-bronchodilator $FEV_1/FVC < 0.70$ confirms the presence of persistent airflow limitation.
- Validated questionnaires such as the COPD Assessment Test (CAT) or the Clinical COPD Questionnaire (CCQ) are recommended for a comprehensive assessment of symptoms.

GOLD CLASSIFICATION OF SEVERITY OF AIRFLOW LIMITATION IN COPD

(Based on Post-Bronchodilator FEV_1)²

In patients with $FEV_1/FVC < 0.70$:

GOLD 1: MILD

$FEV_1 \geq 80\%$
predicted

GOLD 2: MODERATE

$50\% FEV_1 < 80\%$
predicted

GOLD 3: SEVERE

$30\% \leq FEV_1 < 50\%$
predicted

GOLD 4: VERY SEVERE

$FEV_1 < 30\%$
predicted



GOLD COPD TREATMENTS²

OXYGEN THERAPY:

In patients with severe resting chronic hypoxemia, long-term oxygen therapy improves survival.²

NON-INVASIVE VENTILATION THERAPY:

In patients with severe chronic hypercapnia and a history of hospitalization for acute respiratory failure, long-term non-invasive ventilation may decrease mortality and prevent re-hospitalization.²

DISPARITIES IN LUNG HEALTH: WOMEN AT GREATER RISK OF COPD



WOMEN WITH COPD: BY THE NUMBERS⁵

Did you know that women are less likely to be diagnosed properly with COPD than men who go to their doctors with the same histories and symptoms?

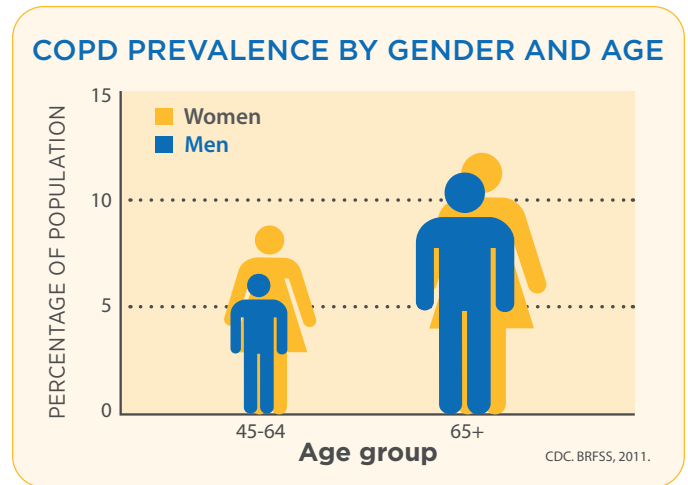
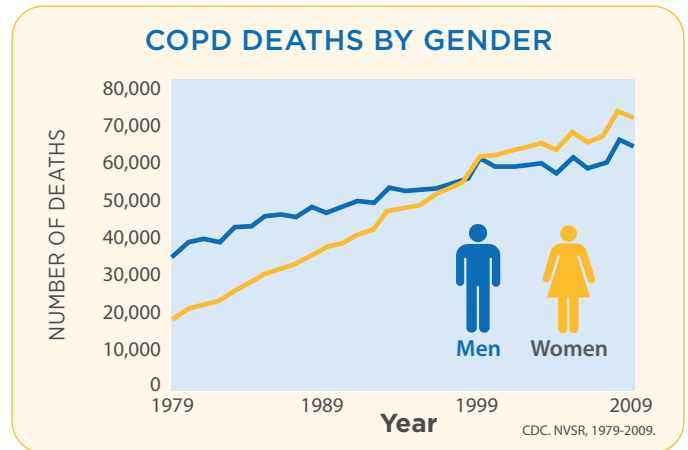
- More than 7 million women in the United States currently have COPD. Since COPD has historically been thought of as a “man’s disease,” it is likely that millions more women have symptoms but have yet to be diagnosed.
- The number of deaths among women from COPD has more than quadrupled since 1980, and since 2000 the disease has claimed the lives of more women than men in this country each year.
- Women are 37% more likely to have Chronic Obstructive Pulmonary Disease (COPD) than men and now account for more than half of all deaths attributed to COPD in our nation.
- Women with COPD tend to develop the disease at a younger age, and are much more vulnerable to COPD before the age of 65.



CONTACT YOUR LOCAL APRIA REPRESENTATIVE TO SCHEDULE TESTING FOR YOUR PATIENTS.

Capnography: End-tidal CO₂ can be used to document the severity of the disease state for the COPD population.⁴

Overnight Oximetry Testing: Home overnight oximetry can be used to evaluate nocturnal desaturation in patients with COPD. In fact, 49.2% of patients with COPD with a resting saturation of <95% will desaturate at night.³



¹CDC; Chronic Obstructive Pulmonary Disease among Adults - United States; 2011; MMWR. 2012; 61(46):938-943; <https://www.cdc.gov/copd/maps/index.html>.

²Global Strategy for the Diagnosis, Management and Prevention of COPD; Global Initiative for Chronic Obstructive Lung Disease (GOLD) 2017 Report; www.goldcopd.org/.

³Thorax. 2009 Feb; 64(2):133-8.

⁴Ahrens, T.; Technology utilization in the cardiac surgical patient: SvO₂ and Capnography Monitoring; CritCare NursQ; 1998;21:24-40.

⁵American Lung Association. Disparities in Lung Health Series 2013; <http://www.lung.org/our-initiatives/research/lung-health-disparities/the-rise-of-copd-in-women.html>.

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YOUR APRIA REPRESENTATIVE

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