

Algorithm – Managing a COPD Exacerbation in Primary Care



Patient is feeling unwell

and finding it harder to breathe than usual or experiencing any of the following:

- More coughing
- More phlegm
- Thicker phlegm than usual.

Recommend they start using more short-acting bronchodilator (SABA) e.g. *salbutamol* 4-8 puffs (400-800 mcg), via MDI and spacer every 3-4 hours, titrated to response.

Patient is feeling worse

- 3-4 hourly SABA not relieving symptoms adequately

Recommend: Commence oral prednisolone 30-50mg daily for 5 days, then stop.

If clinical features of infection are present:

- A change in colour and/or volume of phlegm
- With or without fever

Recommend: Also commence oral antibiotics (amoxicillin or doxycycline) for 5 days.

Patient still unwell

2-5 days after treatment commenced

Recommend:

- Review by GP or specialist.
- Review and reinforce the use of the COPD Action Plan.

When the patient is feeling better

Recommend:

- Step down short-acting bronchodilator use
- Return to usual daily prescribed medicines
- Write or review and reinforce the use of the COPD Action Plan.

If patient has frequent exacerbations (2 or more in last 12 months) they are at higher risk of further exacerbation and mortality.

Recommend: Early review to:

- Optimise pharmacotherapy following “Stepwise Management of Stable COPD”
- Check immunisation status
- Check smoking status
- Refer to pulmonary rehabilitation
- Arrange a follow-up review when stable

When to send to hospital

if any of the following:

- Marked increased intensity of symptoms
- New or worsening peripheral oedema
- Worsening of hypoxaemia from usual (*if known*)
SpO₂ <92% if not on home oxygen
- Shortness of breath that is worsening and/or at rest
- High fever
- Altered mental state (confusion, slurred speech, drowsiness)
- Chest pain
- Worsening of co-morbidities (e.g. *heart failure, ischaemic heart disease, diabetes*)
- Inability to perform daily activities
- Increased anxiety (feeling scared/afraid)

It is recommended that you consult the suite of COPD-X Guidelines for further information when using this algorithm (COPD-X Plan: Australian and New Zealand Guidelines for the Management of COPD; COPD-X Concise Guide for Primary Care; Stepwise Management of Stable COPD). Visit www.copdx.org.au for further details.

Also see Australian Therapeutic Guidelines Respiratory version 5 (<http://www.tg.org.au/?sectionid=49>) and Antibiotic version 15 Guidelines (<http://www.tg.org.au/?sectionid=41>)

