

# Keep Them Home, Keep Them Healthy

## Managing COPD: Exacerbations, Therapies, and Patient Education Strategies

A free CME and CNE activity featuring roundtable discussion groups with National Jewish Health physician and nurse experts



**OUTCOMES SUMMARY  
REPORT**



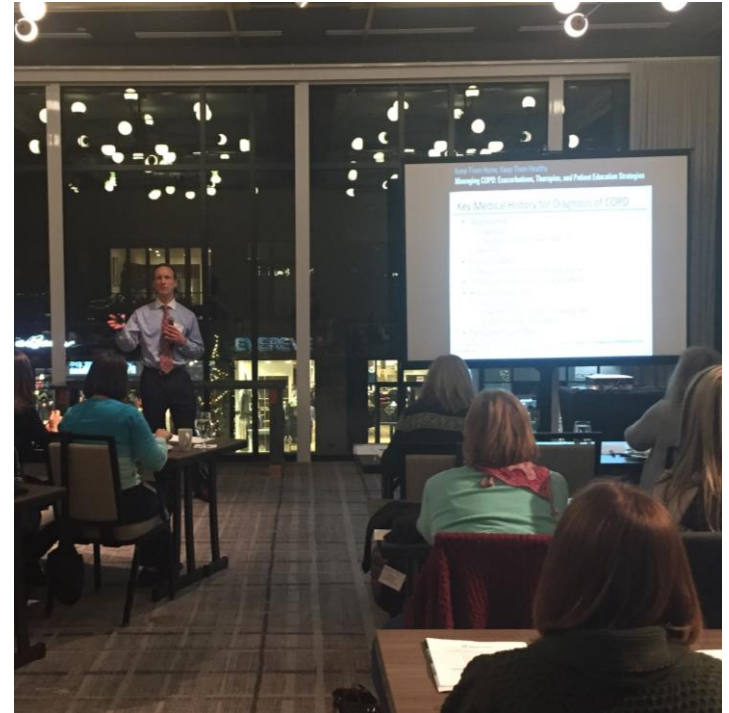
**Live Educational Activity  
December 6, 2016  
Halcyon Hotel in Cherry Creek  
Denver, CO**

## Executive Summary: Activity Details

**Background** This highly-interactive live symposium addressed healthcare provider educational needs in emerging treatments and patient education strategies for COPD.

Features include:

- ✓ Three hands-on workshops broke learners into smaller groups and guided them through proper inhaler use and exacerbation assessment with case-based approaches
- ✓ Interactive didactic presentations
- ✓ Case-based learning
- ✓ Automated Response System (ARS)



December 6, 2016  
Halcyon Hotel  
Denver, CO

## Learning Objectives

1. Implement guideline-concordant assessment of COPD severity and exacerbations in patients.
2. Identify appropriate therapies for COPD severity according to GOLD guidelines.
3. Demonstrate proper technique for inhalers used in the treatment of COPD.
4. Discuss therapies to reduce COPD exacerbations and improve patient outcomes.
5. Provide COPD lifestyle management strategies to patients.

## Outcomes

### Level 4 Outcomes

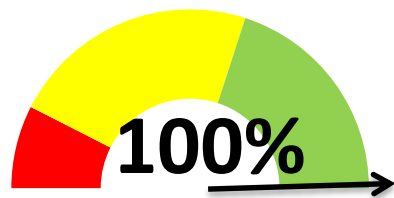
Strategies to measure participants' knowledge and competence:

- ✓ Pre-tests, post-tests
- ✓ ARS questions throughout the activity
- ✓ Evaluations
- ✓ 45-day follow up surveys

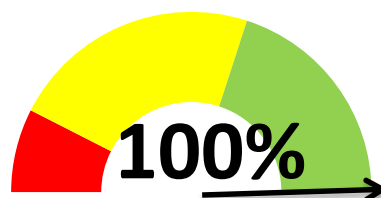


## Dashboard: Activity Impact

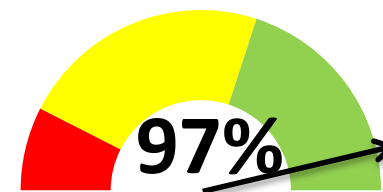
Met Educational Needs




Reinforced/Improved Skills




Improved Ability to Treat and Manage Patients




*Overall satisfaction rated good to excellent*



**52**  
Learners




56%  
Prescribers




38%  
Nursing

Overall relative knowledge gain from pre- to post-activity



**39%**

Estimated # of Patients with COPD seen per month by participants



**>1300**



# Managing COPD: Exacerbations, Therapies, and Patient Education Strategies

## Overview: Faculty Presenters – NJH Faculty and Providers

### Program Chair:

#### **Barry Make, MD**

Professor of Medicine  
Co-Director, COPD Program  
Director, Pulmonary Rehab, and Respiratory Care



### Presenting Faculty:

#### **Anthony N. Gerber, MD, PhD**

Associate Professor  
Department of Medicine  
Division of Pulmonary, Critical Care and Sleep Medicine  
Department of Biomedical Research



#### **Steven E. Lommatzsch, MD**

Assistant Professor  
Department of Medicine  
Division of Pulmonary, Critical Care and Sleep Medicine



### Nurse Facilitators:

**Deborah Fending, RN, BSN, AE-C**  
Staff Development Nurse  
Nursing Service



**Heather Howison, RN**  
Staff Nurse  
Adult Clinic



**Ann Mullen, RN, CNS, AE-C, CDE**  
Clinical Nurse Specialist  
Patient Education Coordinator  
Nursing Service



# Overview: Self-Reported Performance (45-Day Survey Results)

N = 27



88.5%

indicated their patients  
have benefited from the  
information learned



88.9%

indicated they were provided  
new ideas or information  
they have used in practice

The **top three changes** respondents have made or intend to make (for those that had not seen any COPD patients within the 45-day time period) are:

- ✓ Use **alternative communication methodologies** with patients and families
- ✓ Change my **screening/prevention practice**
- ✓ Incorporate **different diagnostic strategies** into patient evaluation

# Managing COPD: Exacerbations, Therapies, and Patient Education Strategies



## Key Lessons Learned

- Inhaler technique (X 2)
- Evidence-based guidelines
- Treatment for COPD (X2)
- Exacerbations risk and assessment
- Interpreting the spirometry



## Needs for Further Education

- Comorbidities
- Spirometry interpretation
- Prevalence and epidemiology of COPD
- Treatment therapies
- Oxygen management in COPD patients

## What Attendees are Saying

**“This presentation was a gem. I wish all presentations would be as clear, concise and targeted a(s) this one.”**

**“Everything was great and very informational. I learned a lot.”**

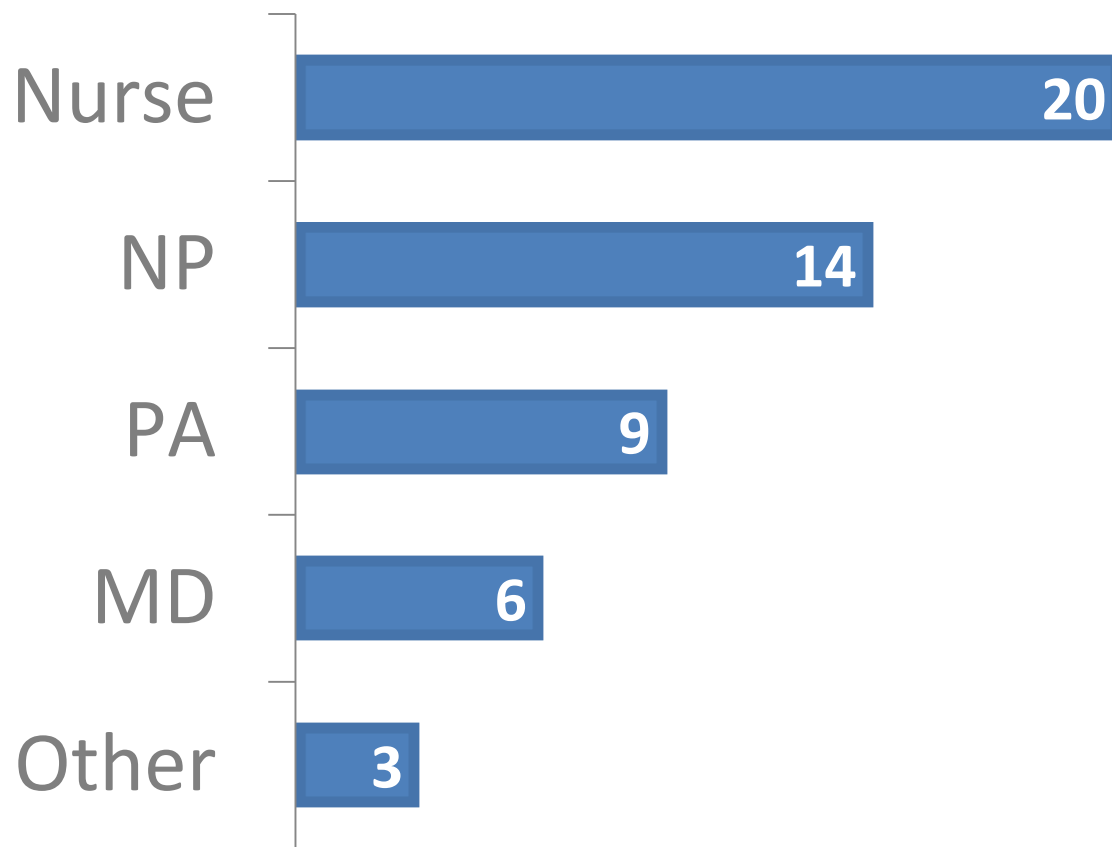
**“Best session ever.”**

**“This was a great evening... informative, helpful, practical, enjoyable.”**

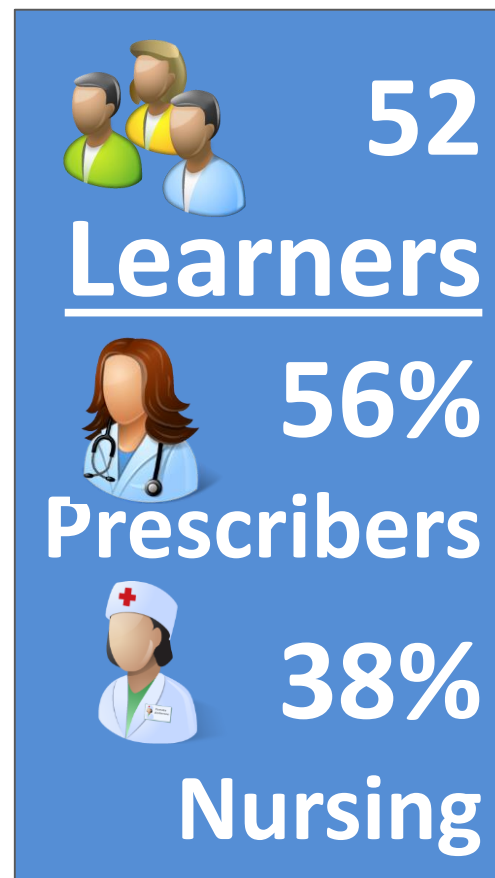
**“I was impressed with the expertise and knowledge of the Presenters!”**

## Level 1 Outcomes: Participation

ATTENDEE BREAKDOWN



\*Other: BA, RPh, Industry Representative



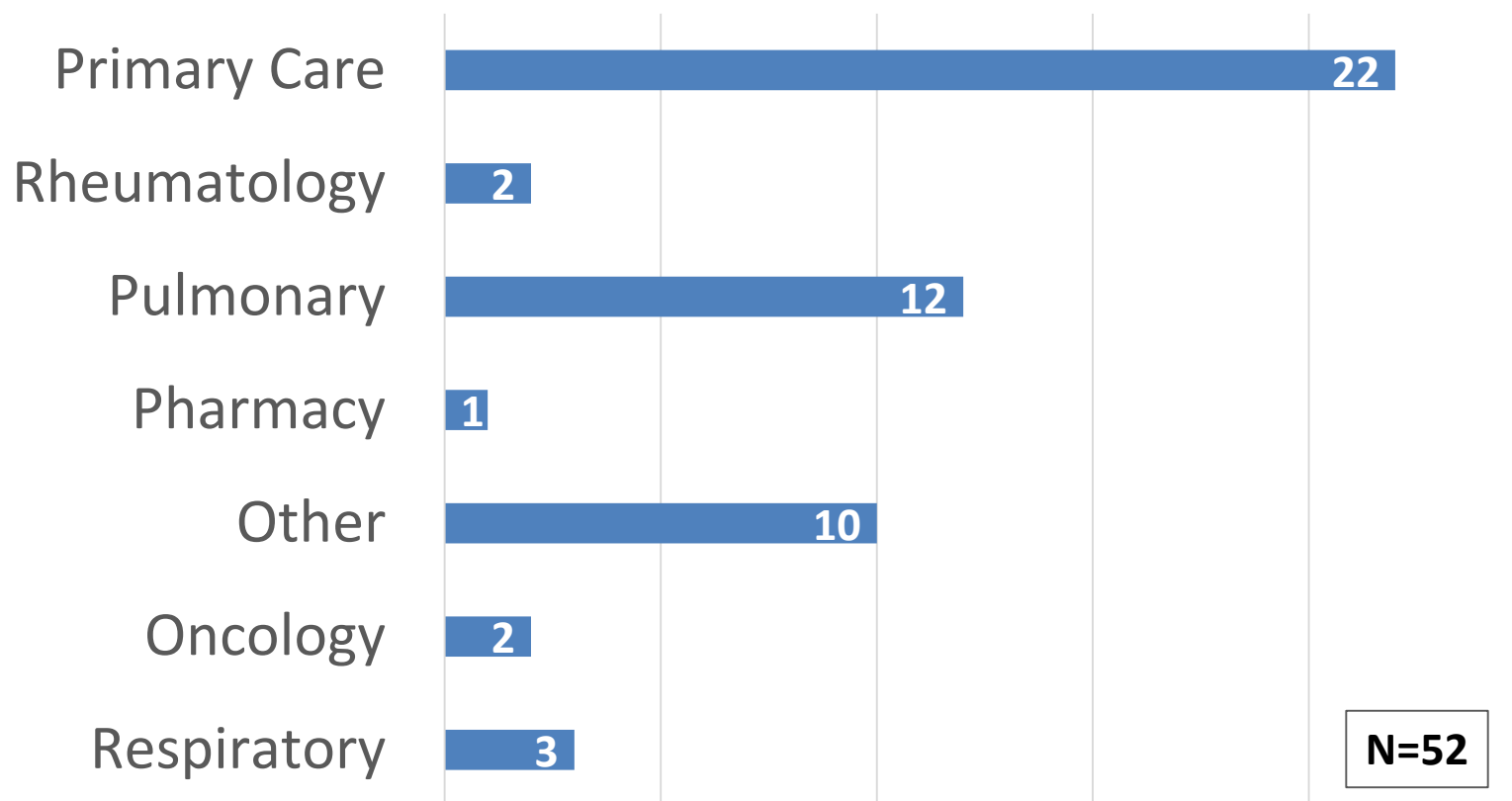
52  
Learners

56%  
Prescribers

38%  
Nursing



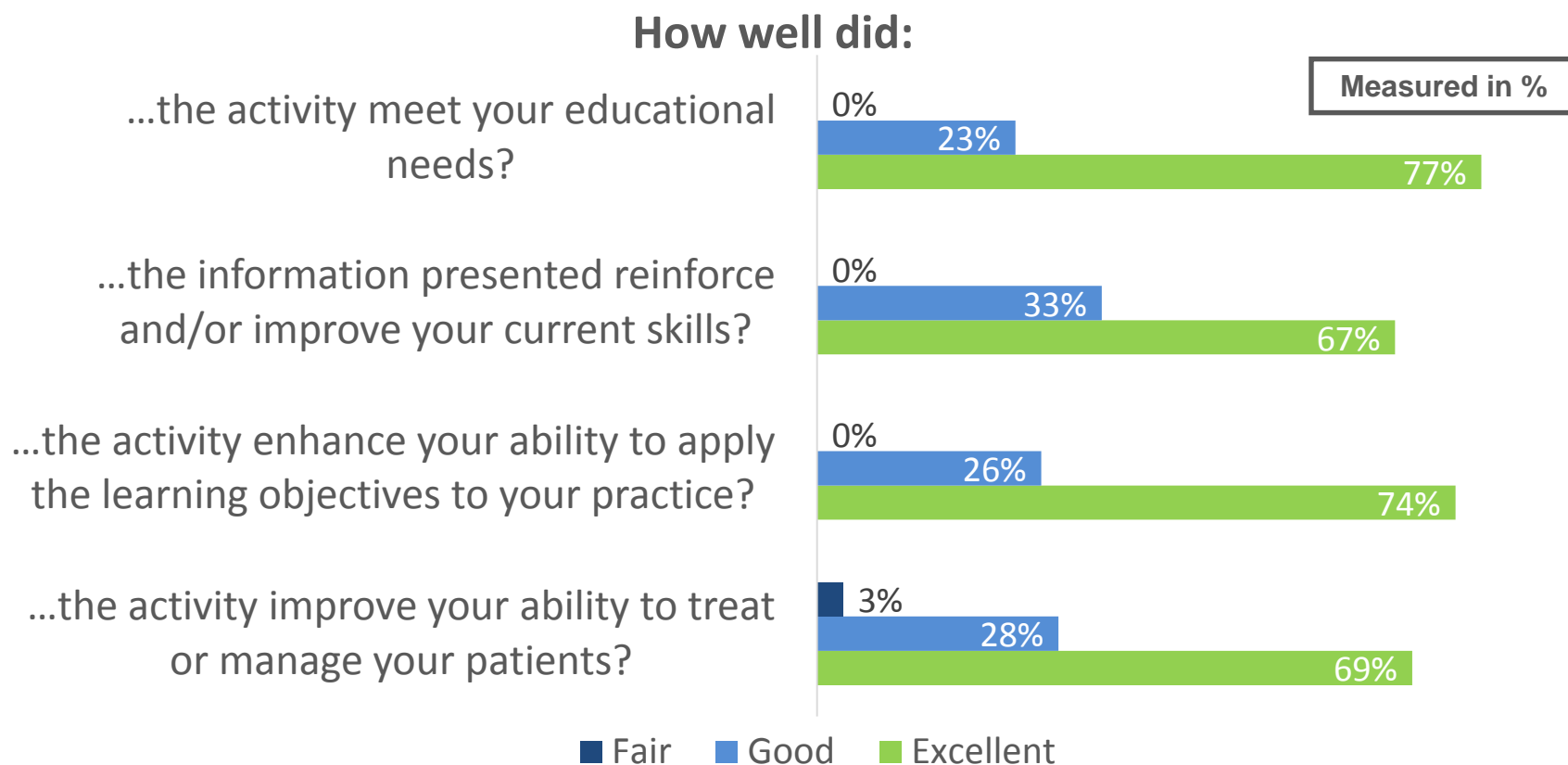
## Level 1 Outcomes: Participation Specialty Breakdown



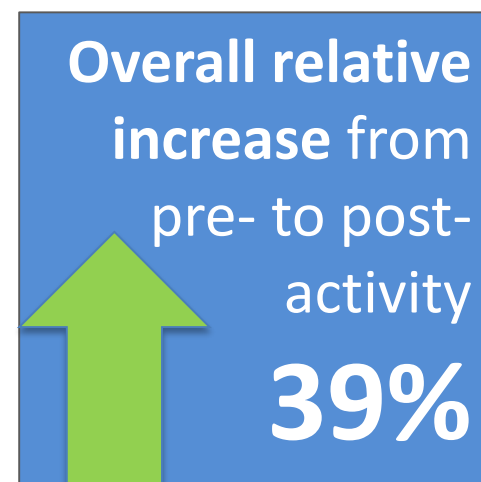
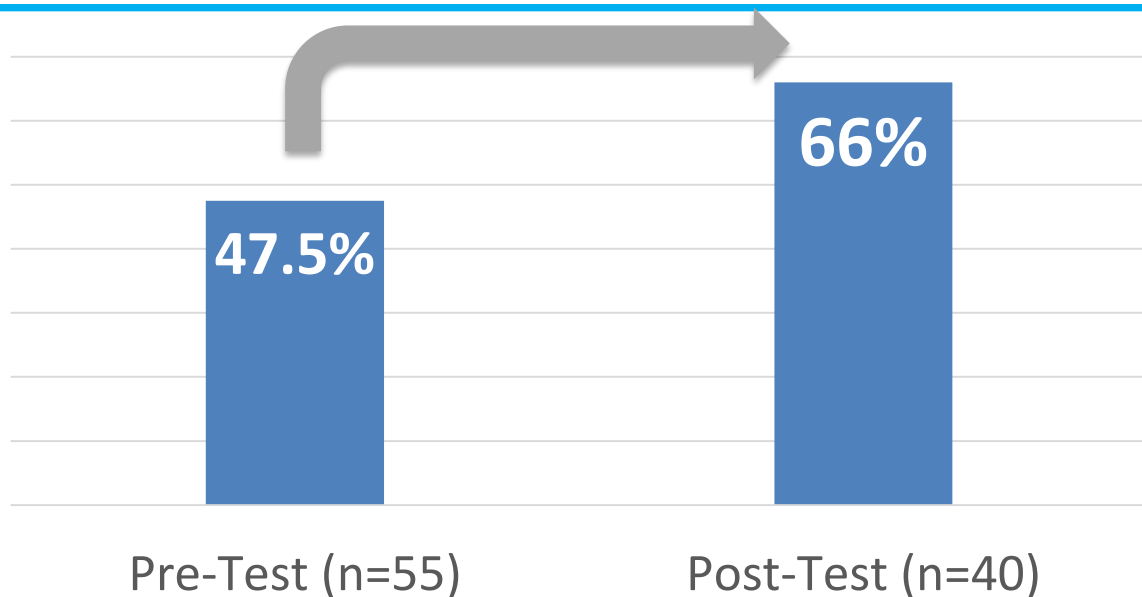
\***Other:** Case management, disease management, infusion therapy, infectious disease, palliative care, research, no specialty selected

## Level 2 & 3 Outcomes: Satisfaction and Learning

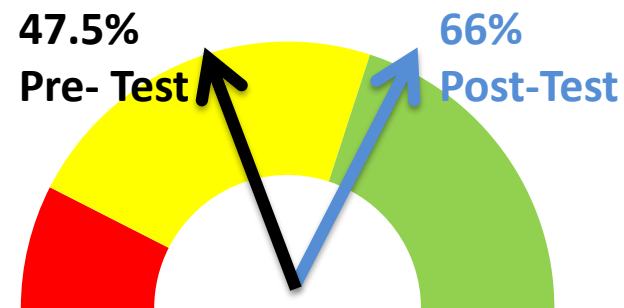
*Analysis of participants responses related to educational needs*



## Level 3 & 4 Outcomes: Learning (Knowledge and Competence)



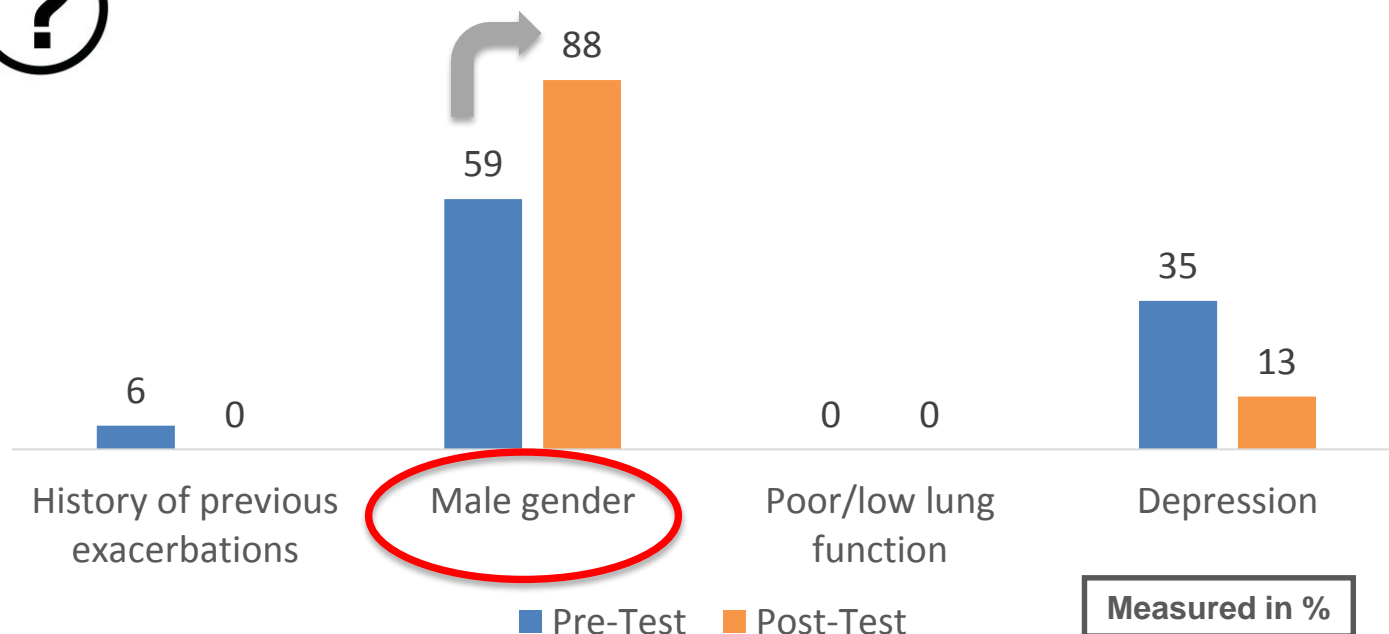
Level 3 and 4 outcomes were measured by comparing participants' pre- and post-test answers. The attendees' responses to these questions demonstrated that participants gained knowledge as a result of the activity.



## Pre/Post Test Comparison: (Addresses Learning Objective (LO) 1)



Which of these is NOT a risk of future COPD exacerbations?

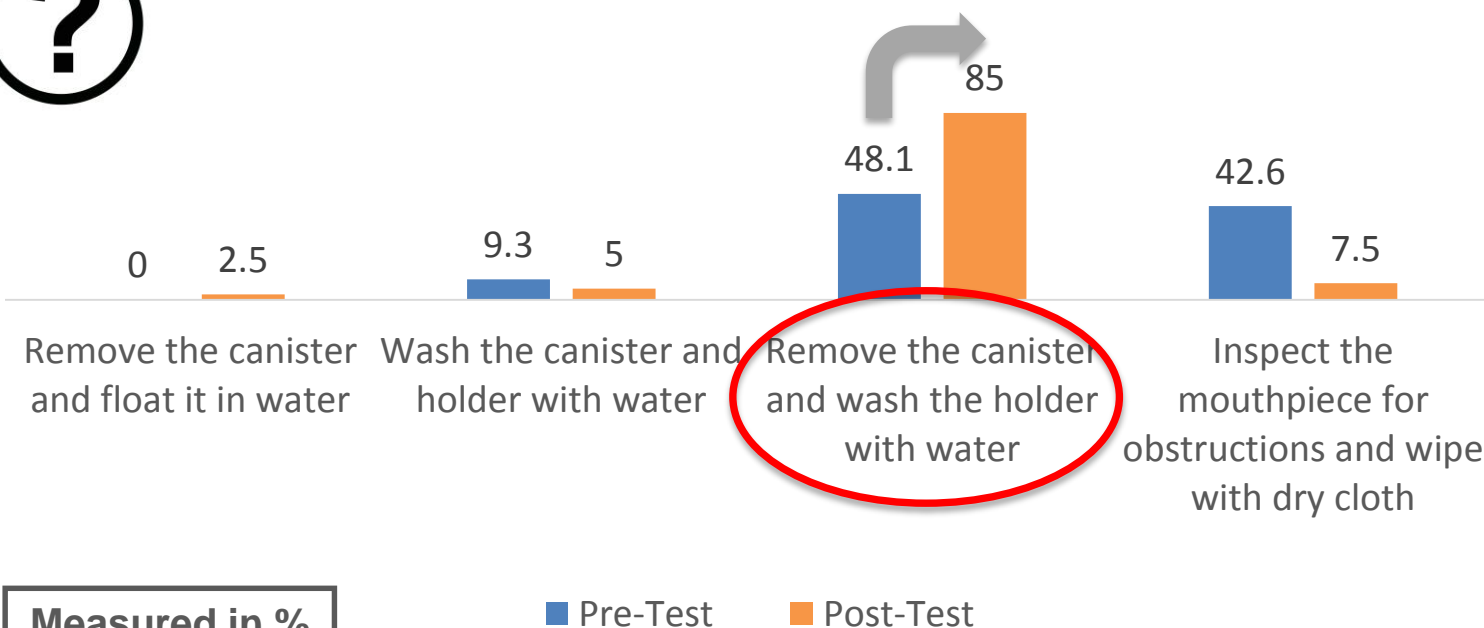


average increase pre- to post-activity: **49%**

**Best answer: Male gender**, since it is actually the female gender that has been associated with increased risk of exacerbations. This is an association and does not have a known etiologic cause as to why females tend to have more exacerbations.

## Pre/Post Test Comparison: (Addresses LO 3)


To clean an albuterol inhaler, a patient should:

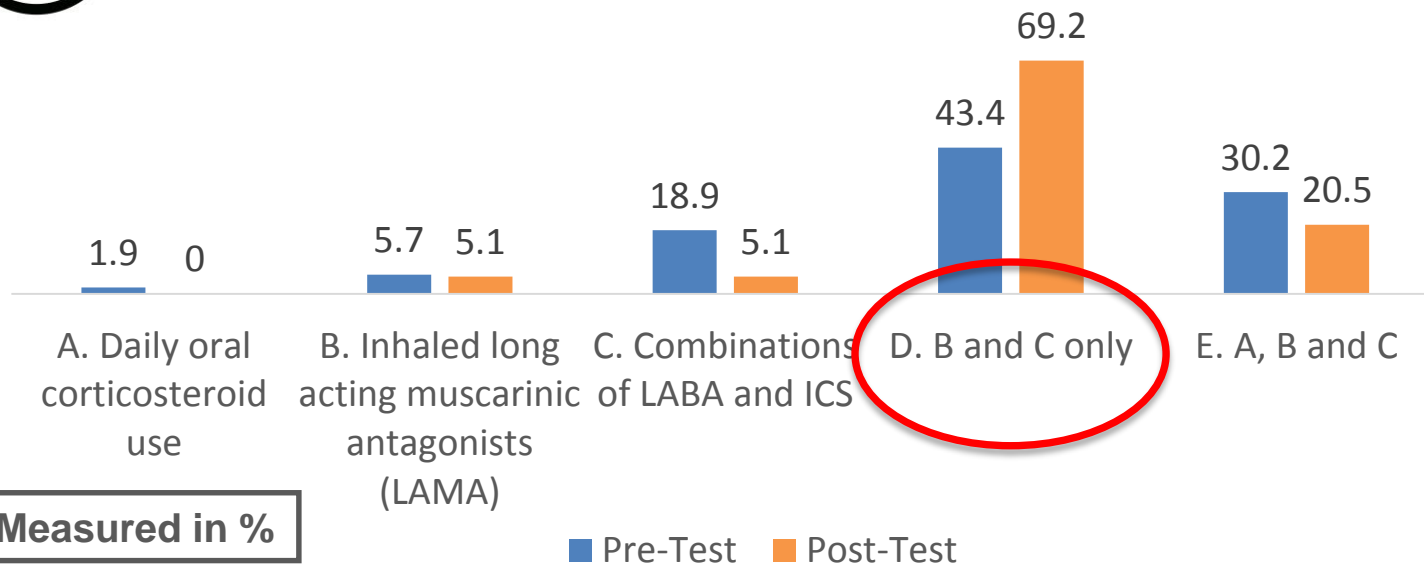


average increase pre- to post-activity:  
**77%**

**Best Answer: Remove the canister and wash the holder with water.** The rationale is that the opening in the sleeve (holder) where the stem valve propels the medication out of the canister can become clogged and as a result the patient may not get a full dose. HFA propellant is warm and sticky.

## Pre/Post Test Comparison: (Addresses LO 4)

 Which of the following medications has been shown to reduce the risk of COPD exacerbation?



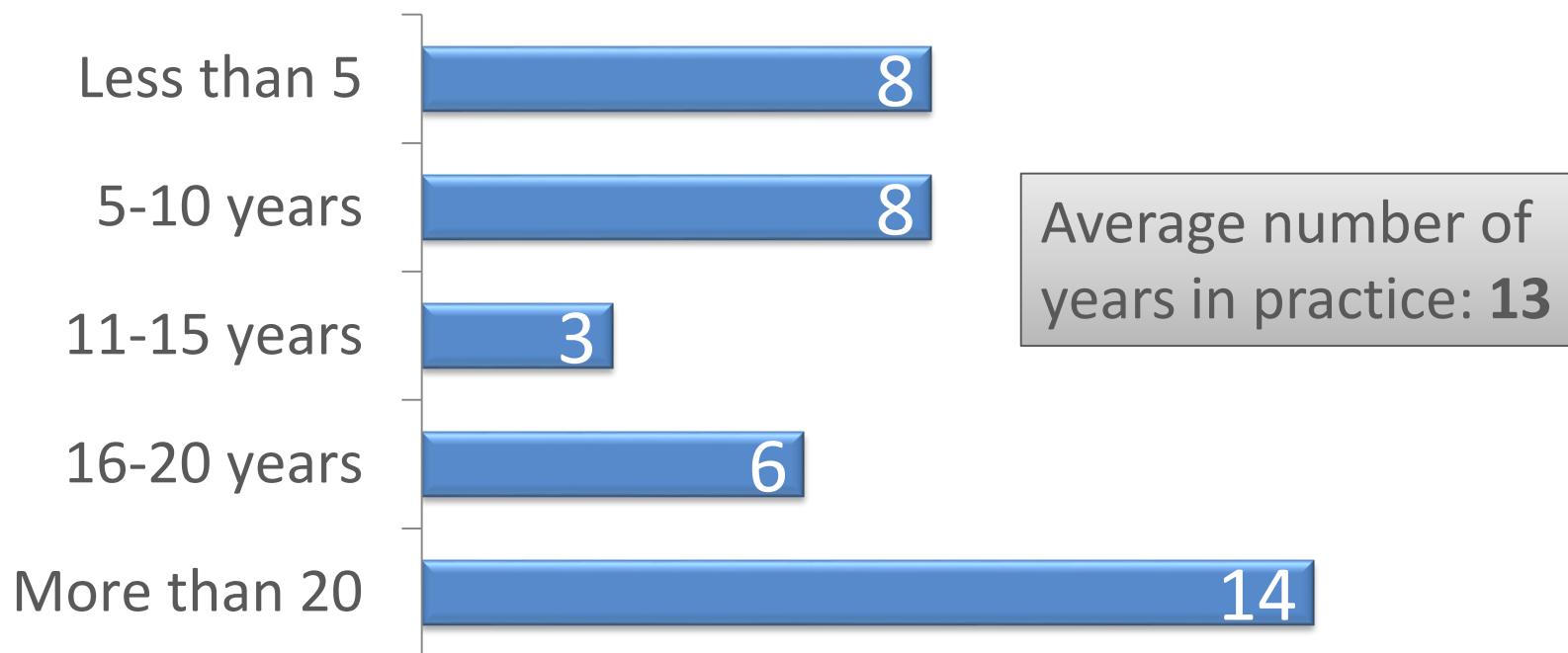
average increase pre- to post-activity: **59%**

**Best Answer:** B and C only. The UPLIFT study showed that tiotropium, a LAMA, decreased the risk of COPD exacerbation. Similarly, a combination of LABA and ICS was shown to reduce exacerbations in the TORCH study, a large randomized controlled trial. In contrast, daily oral corticosteroid use is associated with worse outcomes in COPD.



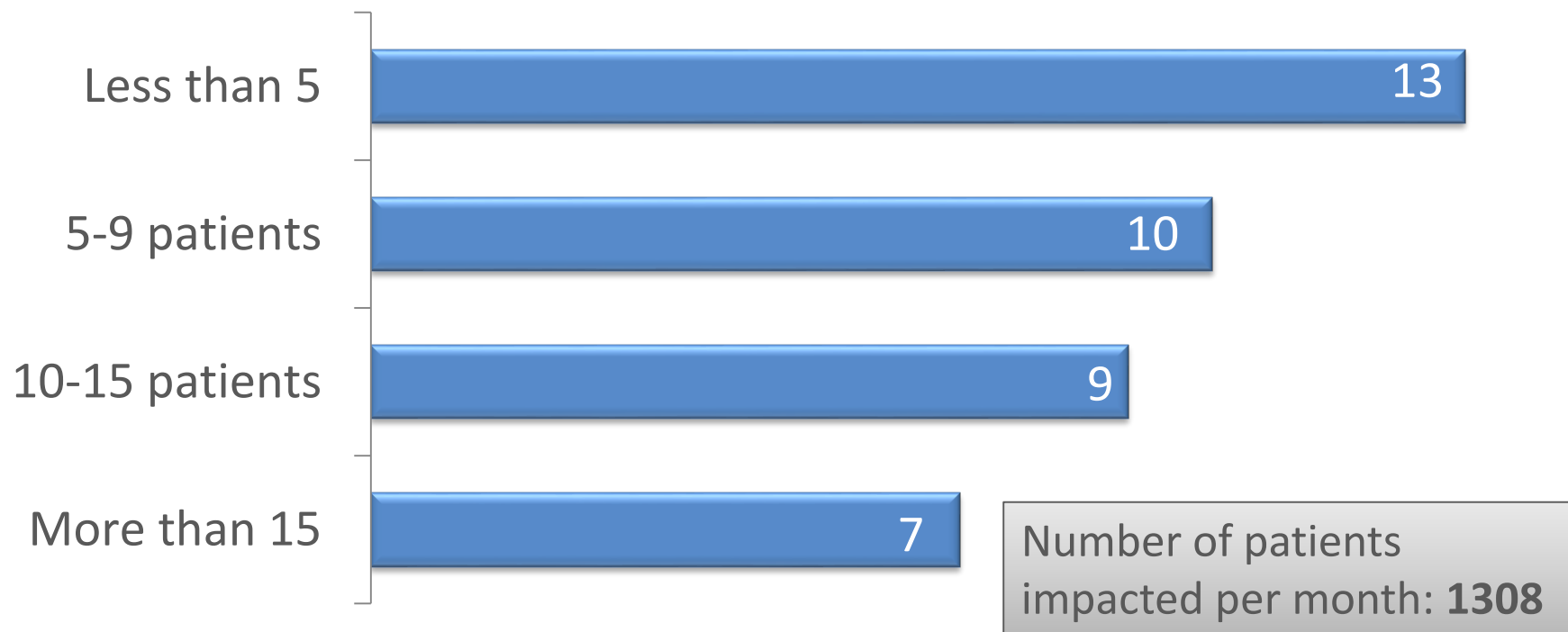
# Level 4 Outcomes: Competence

Learners' Average Years in practice



# Level 4 Outcomes: Competence

What is the average number of patients you treat per week with conditions discussed in this activity?

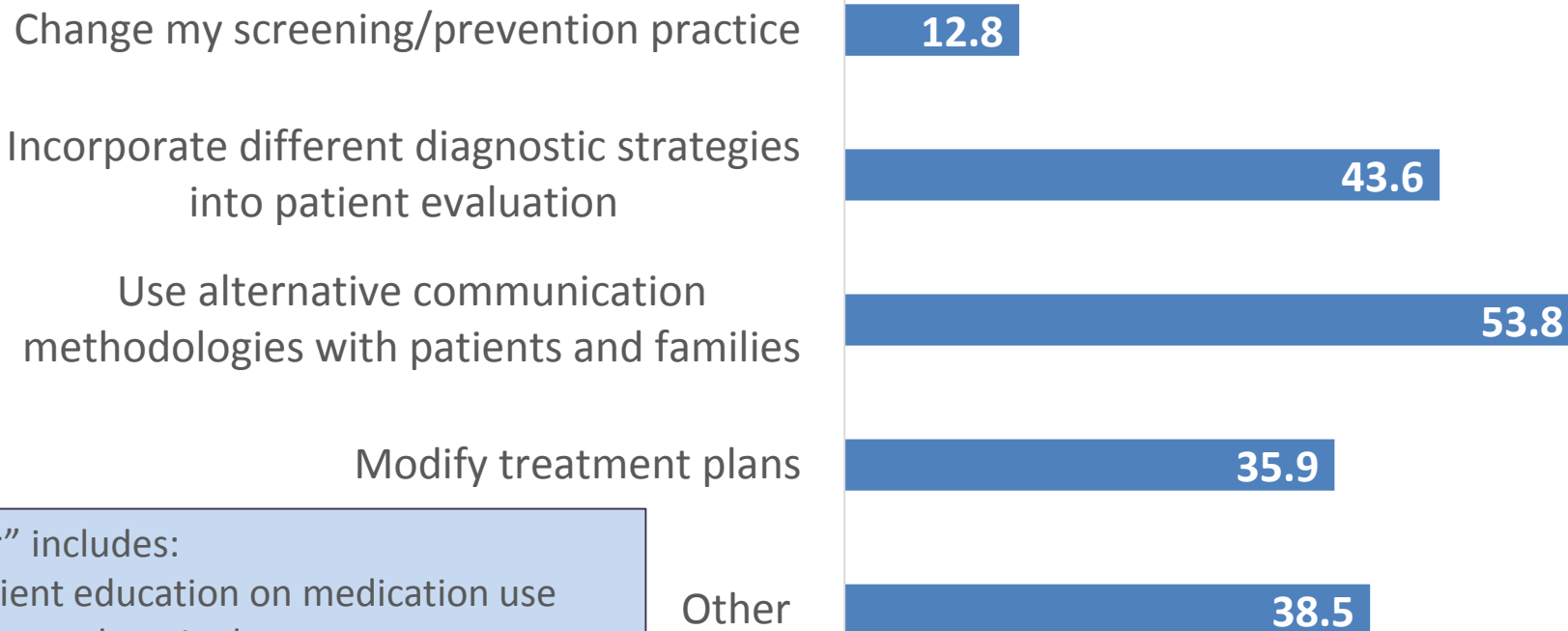


## Evaluation Results

N = 40

100% of post-test respondents stated they are extremely or somewhat likely to “make changes to my practice.” Those changes include:

Measured in %



“Other” includes:

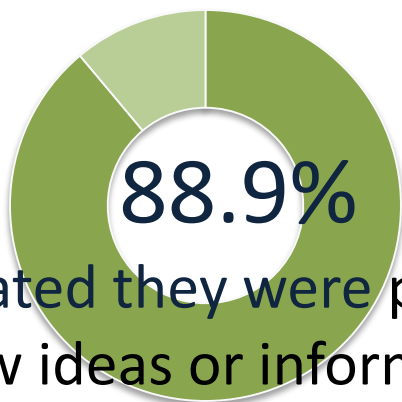
- Patient education on medication use
- Enhance how I educate
- Know when to send patients to hospital

# Overview: Self-Reported Performance (45-Day Survey Results)

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indicated they were provided new ideas or information they have used in practice

The **top three changes** respondents have made or intend to make (for those that had not seen any COPD patients within the 45-day time period) are:

- ✓ Use alternative communication methodologies with patients and families
- ✓ Change my screening/prevention practice
- ✓ Incorporate different diagnostic strategies into patient evaluation

# Overall Activity Impact

**Main Findings:** The attendees' (n=40) responses to post-test evaluation questions demonstrated the following:

- ✓ **100%** of participants indicated that the materials were **presented objectively and free of commercial bias.**
- ✓ **95%** of participants indicated that the activity **addressed strategies for overcoming barriers to optimal patient care.**
- ✓ **100%** of participants stated that the content **presented was evidence-based and clinically relevant.**
- ✓ **100%** of participants indicated that the **activity format was very or somewhat effective in meeting their learning needs.**

# Executive Summary: Certification

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National Jewish Health is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians and by the California Board of Registered Nursing to provide nursing contact hours for nurses.



National Jewish Health designates this live activity for a maximum of 2.5 *AMA PRA Category 1 Credits™* and a maximum of 2.9 nursing contact hours. Participants should claim only the credit commensurate with the extent of their participation in the activity.



## About NJH

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- ✓ Largest pulmonary division in the world and the only hospital whose principal focus is respiratory and related diseases.
- ✓ #1 or #2 ranking in Pulmonology category by U.S. News & World Report (since category was added in 1997).
- ✓ Top 7 percent of institutions funded by the National Institutes of Health, an extraordinary achievement for an institution of NJH's size.
- ✓ NJH is co-leading COPDGene, the largest and most comprehensive study of COPD patients ever undertaken.
- ✓ The NJH COPD clinic is the largest single COPD clinic in the nation and was recently recognized by U.S. News and World Report for its expertise in treating COPD, receiving a “high-performing” designation

