

## Useful Contacts:

Your Doctors Surgery:.....

Contact your Surgery when it is next open after you have started the course of co-amoxiclav & prednisolone.

Contact your surgery for advice if your symptoms do not improve within 48 hours, or continue to get worse, follow the instructions in this leaflet if they get severe.

## Support Group

Name:

Contact Name:

Tel:

## Cambridgeshire and Peterborough CCG Medicines Management Team

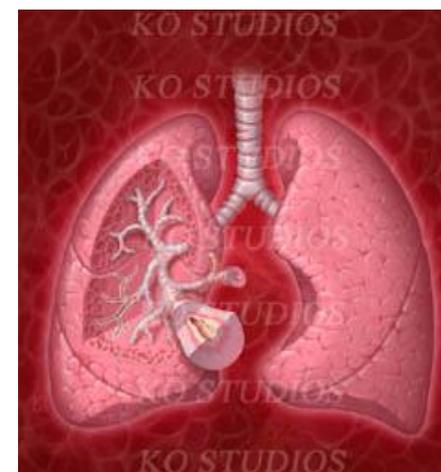
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Cambridgeshire and Peterborough  
Clinical Commissioning Group

# Managing an Exacerbation of Chronic Obstructive Pulmonary Disease (COPD)



This leaflet aims to explain how you can self manage an exacerbation of your COPD using **prednisolone & co-amoxiclav**

## What is an exacerbation ('flare up')?

An exacerbation is a worsening of your symptoms from those you would normally experience on a day-to-day basis. This may happen very suddenly.

## What causes an exacerbation?

Exacerbations may be caused by a chest infection, although other factors such as air pollution, changes in weather, viruses and stress can also cause them.

## What we can do to help:

Some exacerbations may become severe and can result in admission to hospital; this can be distressing and disruptive for you. We want to try and **help you avoid having to go to hospital by helping you to recognise the early symptoms and manage the exacerbation yourself at home with the support of your GP and their team.**

## Top Tips to Help Avoid an Exacerbation:

- If you are still smoking – try to STOP (ask your doctor, nurse or pharmacist to help you achieve this)
- Take your regular COPD medication the way your doctor or nurse or pharmacist has asked you to, at the right time and for the correct number of doses per day
- Try and keep as active as possible - you need to get a balance between activity and rest, but avoid doing things that you know make your symptoms worse if possible. Regular exercise has been shown to reduce the number of hospital admissions for COPD patients
- Maintain a sensible weight and diet
- Consider having an annual 'flu jab to reduce your risk of getting 'flu
- Consider having a pneumococcal vaccine to reduce your risk of getting pneumonia
- Consider joining a Support Group

## When should I take my co-amoxiclav & prednisolone?

**You should start your course of co-amoxiclav and prednisolone together if you get two or more of the following:**

- Increased breathlessness that interferes with your normal activities
- Increased cough and increased sputum (phlegm) production
- A change in colour of your sputum (phlegm)
- Your breathing is much faster than normal

If you get an exacerbation of your COPD, you may start to feel generally unwell. If you are not sure whether you are feeling unwell due to this, and are uncertain if you should start your course of co-amoxiclav and prednisolone, please contact your GP or Out of Hours Service and discuss your symptoms further with them.

**If your symptoms do not improve in 48 hours, or continue to get worse, then please contact your doctor's surgery during opening hours, or the out of hours service at other times, for further advice.**

## How do I take my medicines in the pack?

### Antibiotics:

Your antibiotic is called **co-amoxiclav**, it is a tablet and should be taken as follows:

**Take ONE co-amoxiclav 625mg tablet 3 times a day for the 5 days, ideally at the start of meal or just before. Swallow the tablet whole.**

### Steroid:

Your steroid is called prednisolone, it is a small white tablet and should be taken as follows:

**Take SIX (6) prednisolone 5mg tablets (30mg) all together as a single dose each morning for 7 days, ideally after some food, swallow the tablets whole.**

**It is extremely important that you finish both courses, even if you feel better earlier**

## How do I adjust my reliever therapy?

You may need to increase your use of the reliever medication, to the maximum number of puffs per day, during an exacerbation and ideally use a spacer device.

Many different types of reliever medication exist so please refer to the information below, which describes your own medication and the maximum dose.

Dear Doctor/Nurse/Pharmacist

Please advise your patients on adjusting their bronchodilator therapy during an exacerbation in the box below. Check they have a spacer compatible with their prescribed bronchodilator device.

## Who should I contact for additional help?

- If you need some further advice or reassurance, please phone your GP's surgery during opening hours, or the emergency out of hours service at all other times
- Only if you feel your exacerbation has become **very severe**, dial 999 for an ambulance

Please contact your GP during surgery opening hours when you start your course of co-amoxiclav and prednisolone. They can provide extra support while you are experiencing an exacerbation.

## How can we do this?

We can help you manage an exacerbation by:

- Providing you with a pack containing a course of co-amoxiclav and prednisolone to keep at home
- Explaining how you can adjust your bronchodilator (reliever) therapy to control your symptoms and use a spacer to help with this

This will allow you to respond quickly to the signs of an exacerbation and should reduce the effect this has on your lifestyle and number of hospital admissions you have.

- The co-amoxiclav will help fight infection
- The prednisolone will ease any inflammation in your lungs
- The bronchodilator (reliever) will help open up your airways and relieve breathlessness
- Using a spacer device with your reliever inhaler will help you to get the medication into your lungs so it works better and reduces your symptoms faster