

OP40.2

Health education in COPD patients at a primary care area in Pontevedra

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Background and Aim: COPD Prevalence in our Primary Care Area is 16% in the mid-aged population. Hospitalizations due to exacerbations is the main limitation to their quality of life (QoL). in order to guarantee a Healthy and Active Aging, GPs should coordinate health educational programmes (HEP) aimed to reduce hospitalizations and to improve the quality of life. We initiated a HEP in 2014 and in this study we show the impact of our HEP after one year of its implementation.

Method: Before and after study. During the first year interventions were focused on (i) improve basic COPD knowledge, (ii) self-management of early symptoms, (iii) use of inhalers, and (iv) smoking counselling. We measured before and after the HEP the following variables: body max index, smoking habit, visits to GP and emergency departments, hospitalizations, COPD Assessment Test (CAT), spirometry parameters and appropriate use of inhalers. Statistical analyses were performed using Stata14®.

Results: 65 COPD patients were included in our HEP, 16 women (24.62%), mean age 69 years old. After one year of implementation, exacerbations in a natural year requiring medical intervention decreased from 61 to 38 ($p=0.02$), visits to their GP went from 107 to 66 a year ($p<0.01$), and ER attendances declined from 16 to 7 a year in this population ($p=0.06$). Mean CAT values decreased from 12.37 (mild impact on life activities) to 9.79 (low impact, $p<0.01$). The percentage of patients that know how to use of their inhalers increased from 75.43% to 90.89% ($p<0.01$) From the initial 21 smokers, 5 quitted smoking; whereas 1 non-smoker began to do it.

Conclusions: HEP interventions are quite effective in our population. HEP not only reduce costs to the health system, but do facilitate the healthy and active aging of COPD patients.

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