Patient Resource Guide: Respiratory Medications

INTRODUCTION

As many as 8 out of 10 patients with obstructive lung disease in the United States experience inhaler device use-related errors. In patient with end-state pulmonary disease or advanced age, the risk of use-related errors is likely far greater. Incorrect inhaler technique not only prevents patients from receiving optimal benefit from their inhalers but can also lead to more medications being prescribed in attempt to control breathing symptoms.

CHALLENGES TO INHALER USE IN HOSPICE

The ability of the medication from an inhaler to provide benefit is dependent upon the patient's ability to get a significant amount of the medication into the lungs, where it can have an effect. The ability to take a deep, sustained breath and coordinate with the use of an inhaler can decline over with age and the progression of end-stage lung disease. This can result in not enough medication getting into the lungs, worsening respiratory symptoms.

ADVANTAGES OF NEBULIZED SOLUTIONS

Increased effectiveness	• More drug gets into the lungs when using a nebulizer • Effectiveness of medication dependent on enough drug getting into lungs
Passive administration	• Nebulizer does not require coordination of breath to use • Patient can breathe normally while using nebulizer
Equivalent Alternative	• Nebulized solutions available with same drugs as inhaler • Hospice agency will ensure transitioned to equivalent regimen

TRANSITIONING TO THE APPROPRIATE NEBULIZED SOLUTION REGIMEN

There are three types of medications commonly used in inhalers: beta-agonists, antimuscarinics, and inhaled steroids. Many inhalers consist of a combination of a long-acting beta-agonist and an inhaled steroid. Patients can also be prescribed an inhaler containing an antimuscarinic. Switching to a nebulizer containing albuterol and ipratropium as well as prescribing an oral steroid, provides medication from each of the classes often prescribed in inhaler form, and in a dosage form that can easily be administered, increasing the chances of a patient's symptoms being adequately controlled.

