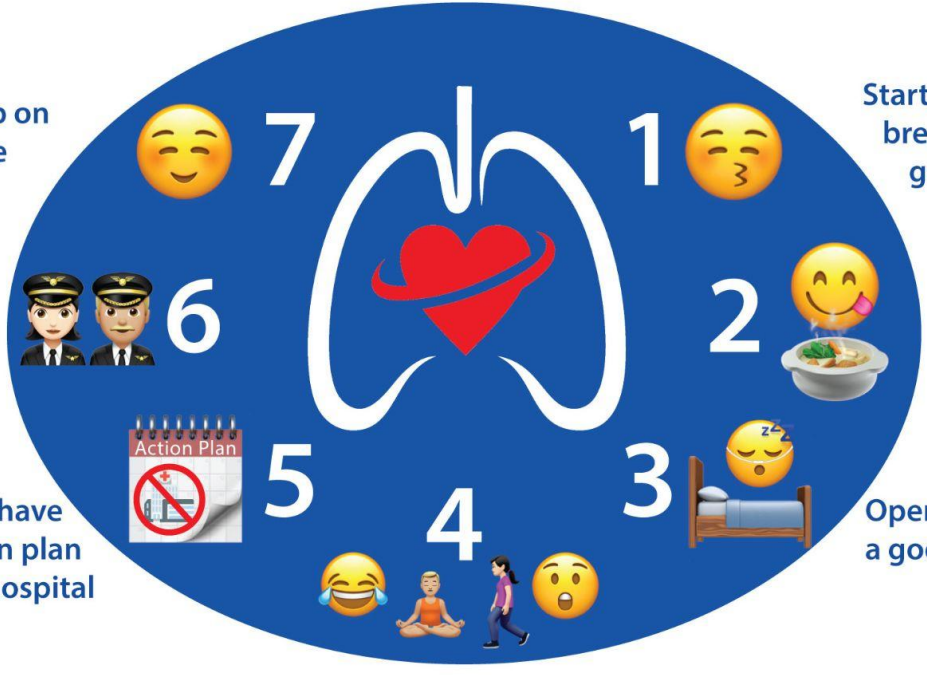
SEVEN STEP ACTION PLAN

COPING WITH YOUR LUNG/HEART HEALTH

BREATHE STRONG AMERICA GUIDE

Managing Your Lung Health to Reduce Emergency Hospital Visits

Seven Step Lung / Heart Action Plan



7 — Don't give up on your purpose

1 — Start your day with breathing exercises, get your air/oxygen

6 — Be the captain of your health care team

2 — Have a lung / heart healthy diet

5 — Plan your day and have a emergency action plan to stay out of the hospital

3 — Open your airways to get a good night's rest

4 — Have fun expanding your lung capacity

BREATHE STRONG AMERICA NON-PROFIT

If You Can Breathe, You Can Breathe Stronger!

Your lung / heart health journey can be very challenging, and that is why we created...

The Seven Step Lung / Heart Health Action Plan

Our guide will help you with:

1 Breathing

2 Eating Right for Your Lung / Heart Health

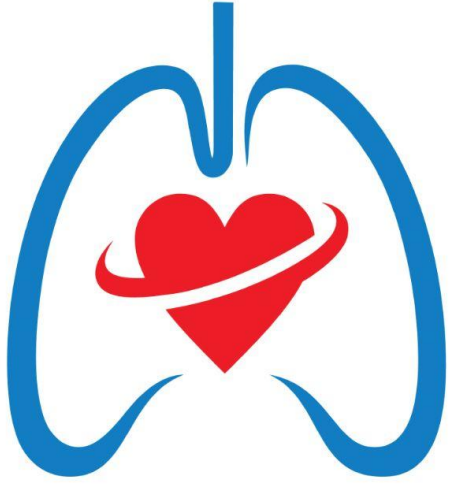
3 Sleeping Well

4 Exercise Plan Five Week Walking Plan

5 How to Stay Out of the Hospital

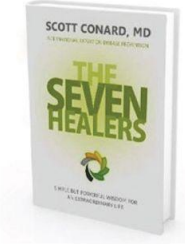
6 Finding the Right Healthcare Team

7 Finding Your Purpose



+ Inhaled Medications Lowering the Cost Oxygen Therapy Options

The Breathe Strong Guide is based on THE SEVEN HEALERS



1. You can only live a few minutes without **Air/Oxygen** (Breathing Exercises)
2. You can only live a few weeks without **Water/Food** (Eating Right)
3. After about a week with no **Sleep**, you will go insane (Sleeping Well)
4. Without **Play/Exercise**, you will become sick, miserable, and depressed; within a few months to years, this too would result in death (Daily Walking)
5. Without a **Treatment Plan**, you will become sicker (Follow Your Action Plan)
6. Although you can live a lifetime without loving **Relationships**, your existence will be shortened and absent of fulfillment...(Finding the Right Healthcare Team)
7. Likewise, you can live a lifetime without **Purpose**, but it will be a life that is incomplete and void of meaning...(So Breathe Strong)

The Seven Healers by Scott Conard, MD, scottconard.com

Breathe Strong America Honors Nick Jones 1935-2015

- **1989** - At 50 years old Nick experienced shortness of breath and had heart attack #1
- **1996** - Diagnosed with COPD and had heart attack #2 Decided to stop SMOKING
- **1997** - Enrolled in Martial Arts and Tai Chi
- **2001** - Went on supplemental oxygen
- **2002** - Founded the Villages Airheads Support Group

Nick's support group is going strong to this day!

For 19 years he lived with COPD

We believe Nick won the battle!

To learn more about Nick, visit

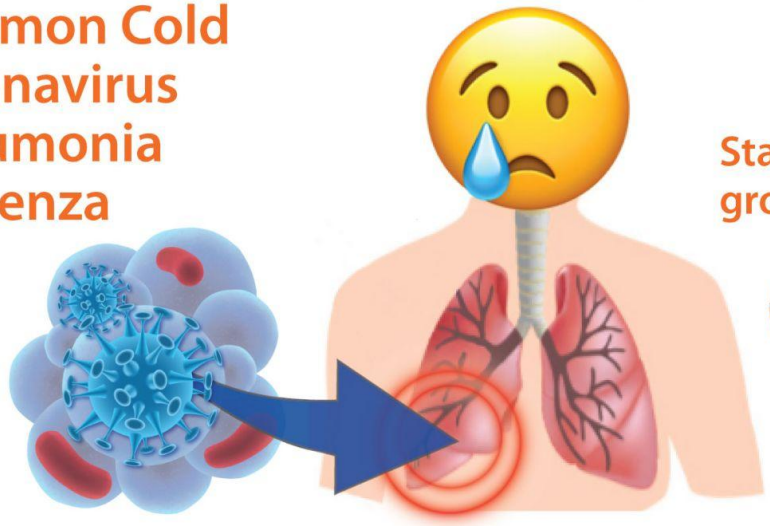
breathestrongamerica.org

BREATHE STRONG AMERICA NON-PROFIT

The Father of Breathe Strong

Respiratory Infections Can Worsen COPD / Pulmonary Fibrosis

- Common Cold
- Coronavirus
- Pneumonia
- Influenza



Keep vaccinations up to date

Stay away from large groups of people

Practice social distancing and wear a mask when needed

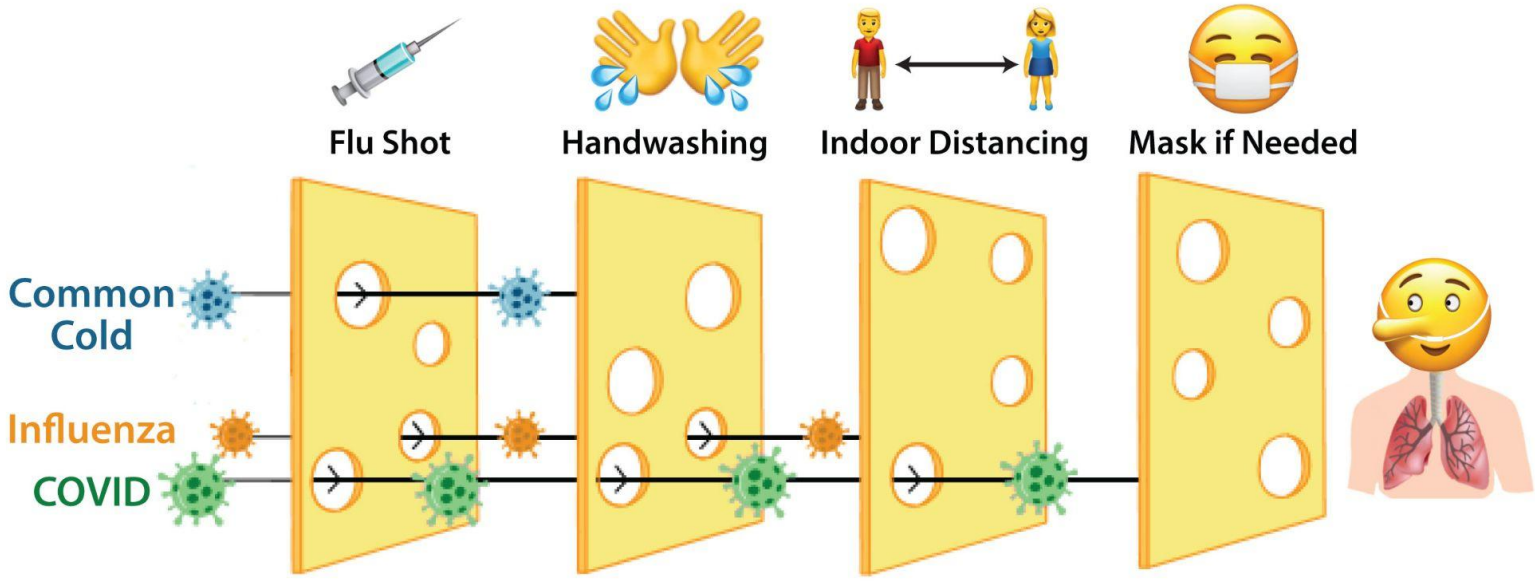
Who is at risk?

People over 60 with underlying medical conditions such as...

- Heart disease
- Asthma
- Diabetes
- Undergoing cancer treatment
- People with weakened immune systems

BREATHE STRONG AMERICA NON-PROFIT

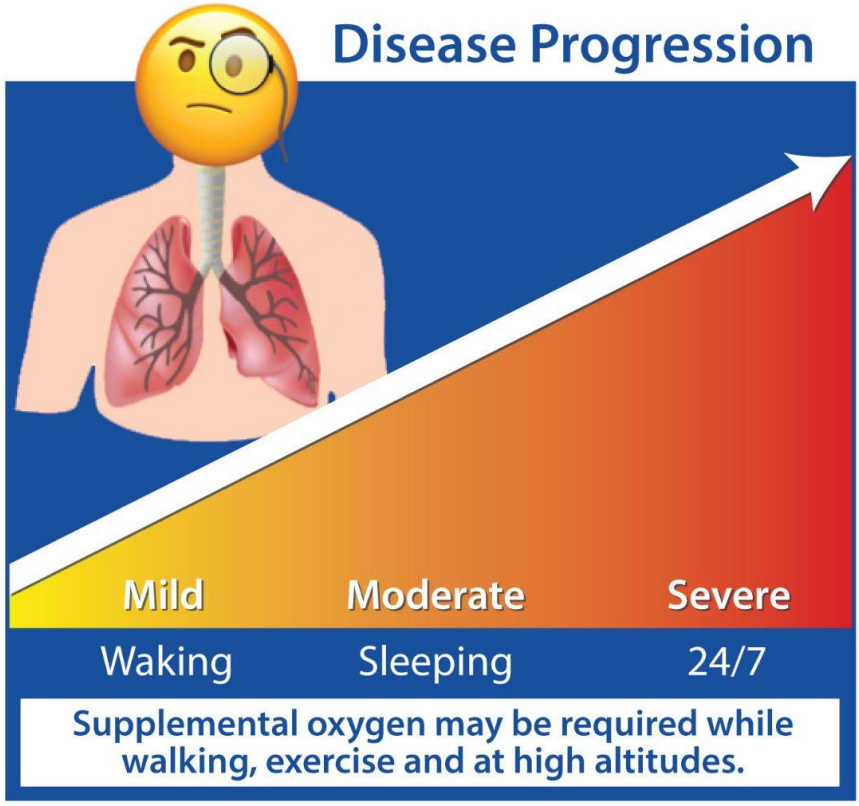
Managing Your Risk To Protect Your Lungs



BREATHE STRONG AMERICA NON-PROFIT

Signs and Symptoms of COPD / Pulmonary Fibrosis

- Shortness of breath
- Wheezing
- Chest tightness
- Ongoing (chronic) cough
- Difficulty with routine activities
- Blood oxygen level low
- Weight loss
- Muscle loss

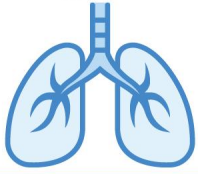


BREATHE STRONG AMERICA NON-PROFIT

Understanding COPD - Chronic Obstructive Pulmonary Disease

COPD is a progressive disease of the lungs that includes chronic bronchitis and / or emphysema, which causes difficulty breathing due to long term damage in the lungs.

- **Progressive because it can be slowed, but not stopped.**



Knowing the Causes and the Risks

Cigarettes - 85% of all COPD deaths are caused by smoking
The absolute #1 cause of COPD is cigarette smoking
And the absolute #1 way to slow COPD down is to stop smoking
N.O.P.E. (Not One Puff Ever) SMOKEFREE.ORG Hot line 800-784-8669

Indoor air pollution
Secondhand Smoke

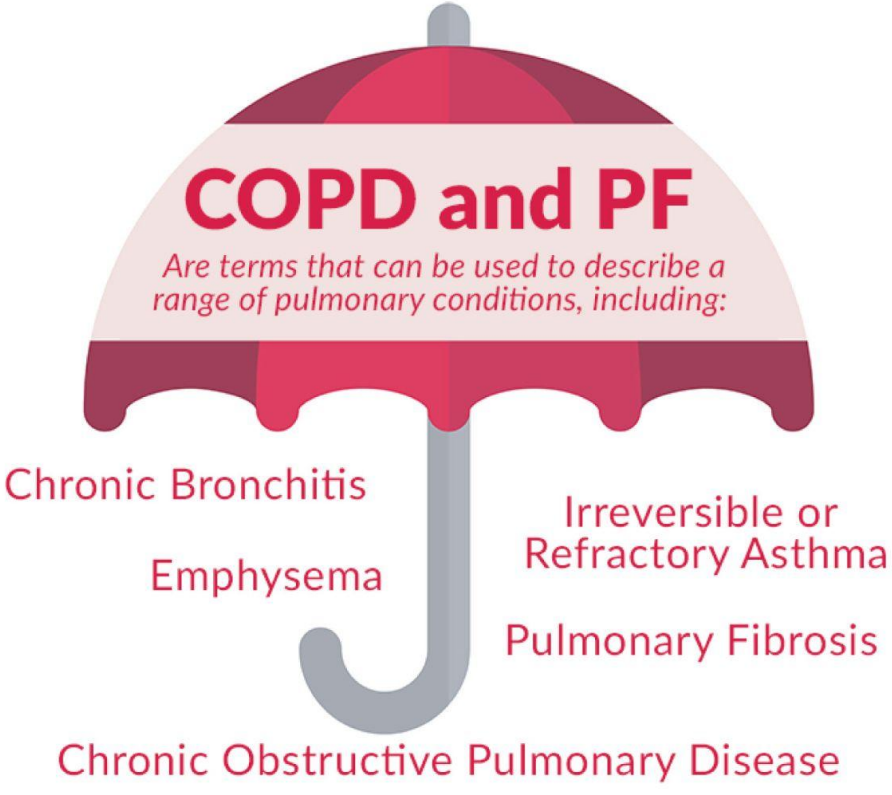
Frequent respiratory infections in childhood
Genetic factors such as Alpha-1 antitrypsin deficiency
Note: All COPD Patients should be tested for Alpha-1

Outdoor air pollution

Occupational exposure to chemicals/dusts

58% of COPD patients are women -
COPD kills more American women than breast cancer and diabetes combined

COPD and PF: Umbrella Terms



BREATHE STRONG AMERICA NON-PROFIT

Common Emotions in Life with Lung Disease

Loss, Isolation, Denial, Anger,

Guilt, Regret, Sadness, Depression,

Confusion,

Anxiety to Breathe

The question is, how can *I* cope?

Your Lung / Heart Health Journey
Began The First Time You Felt Breathless

You feel breathless

You avoid activities that make you feel breathless

You do less

Your muscles weaken

You get more breathless

You feel depressed

Coping With COPD and Pulmonary Fibrosis

Coping with COPD and PF does not mean you have **given up!**
It means you understand you cannot control everything in your life.

It shows that you are ready to continue living your life and
Laugh whenever you can!

This can be a time of reflection and renewal and a new plan of action.

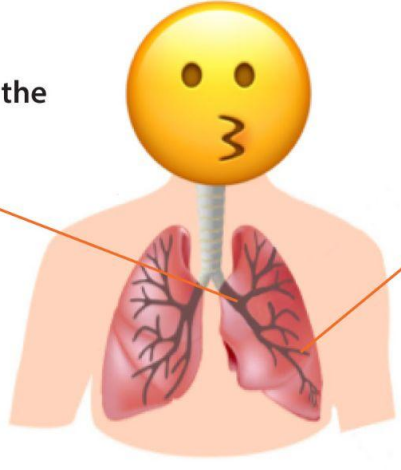
The Breathe Strong Seven Step Action Plan
in conjunction with your doctor treatment plan...
Will Help You Cope!

COPD Traps Air In Your Lungs

When you inhale, air moves from your nose and mouth into lung structures called alveoli.
This is where Oxygen is exchanged for Carbon Dioxide.
COPD and Pulmonary Fibrosis lead to less effective exchange of Oxygen and Carbon Dioxide.

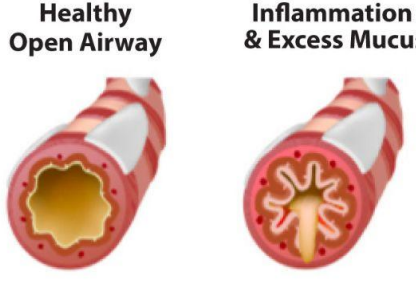
Chronic Bronchitis

The airways that let air in and out of the lungs swell and become clogged.

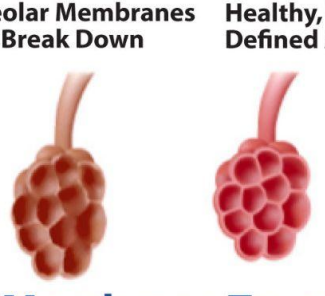


Emphysema

The walls between the air sacs break down.



Mucus Traps Air in the Lungs



Weak Membrane Traps Air

COPD makes it difficult to get the air out of the lungs. The problem is NOT getting the air into the lungs, IT'S GETTING THE AIR OUT OF THE LUNGS. This is why Pursed Lip Breathing helps to get the trapped air out of the lungs, and get the fresh oxygenated air into the lungs.

ACTION STEP #1

You can only live a few minutes without...

Air/Oxygen: Learn Breathing Techniques

"Pursed Lip Breathing"
Can Open up your Lungs and Help Relax Your Heart

A. Take a slow breath in through your nose.
While you breathe in, count "1...2...3..." Fill your lungs.

B. Don't hold your breath.
As you breathe out, purse your lips as if you were blowing bubbles.

C. Don't breathe out too fast.
Blow out like you are blowing bubbles, not like you are blowing out a candle.

Repeat this 4 or 5 times to slow down your breathing and make it easier to get the air you need.

BREATHE STRONG AMERICA NON-PROFIT

ACTION STEP #1 Breathing Tips for Catching Your Breath

It's normal to hold your shoulders tense and high.

Take a minute to drop your shoulders down, close your eyes, and relax.

Four things you can do when you become short of breath...

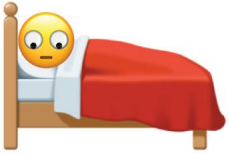
STOP . . . Your activity

REST . . . Do pursed lip breathing

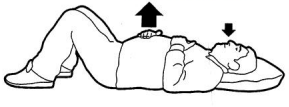
OXIMETER . . . Check your heart rate and blood oxygen

CONTINUE ACTIVITY . . .
Doing pursed lip breathing as you go

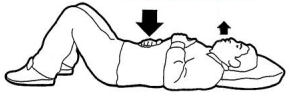
STEP #1 - Air/Oxygen: Belly Breathing Exercise



Breathe in



Breathe out



"Belly Breathing" helps the dome-shaped muscle at the bottom of your lungs move.

This lets you take air into your lungs and makes breathing easier.

A. Lie on your back with your knees bent, in bed or on the floor. Put a pillow under your head. You can also try it while sitting in a chair.

B. Put the palm of one hand on your belly.
Put the palm of your other hand on your chest.

C. Breathe in slowly through your nose. Your belly should push out against your hand. Your chest should not move.

D. Tighten your belly muscles. Breathe out slowly through your mouth. Keep your lips pursed. You should feel your belly go down.
Note: If you feel dizzy as you do this, breathe more slowly.

STEP #1 - Good Cough Exercises to Move Mucus

The Good Cough Exercises

Follow these steps to clear the mucus from your lungs:

A. Sit comfortably in a chair.
Keep your back straight and lean forward.
Spread your knees apart.
Place your hands, elbows, or lower arms on your knees or over a table.

B. Let your belly push out as you take a slow, deep breath.
Fill your lungs almost all the way.

C. Hold your breath while you count 1...2...3...4...

D. Tilt your chin up and open your lips.

E. Use your belly to push the air out of your lungs in short quick bursts.
Make a sound like **"huh - huh - huh"**
Take a breath, and repeat 2 to 4 times.

Note: If you feel dizzy as you do this, breathe more slowly.

Lung Secretion Device

PocketPEP®

Obstructive Positive Expiratory Pressure

The palm-sized PocketPEP® is the smallest OPEP available. OPEP therapy is intended to reduce the risk of hospital acquired pneumonia. When patients continue use of the convenient OPEP therapy at home, it can reduce risk of pulmonary complications.

Learn more at drburtonhpi.com

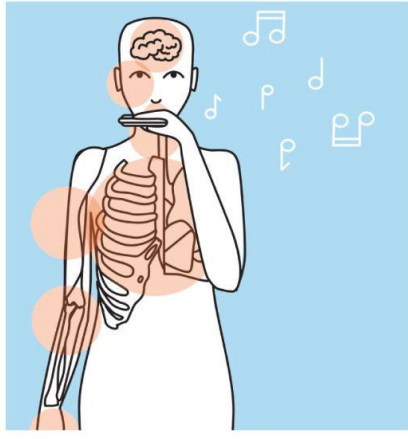
D·R Burton
INSPIRE FOR LIFE

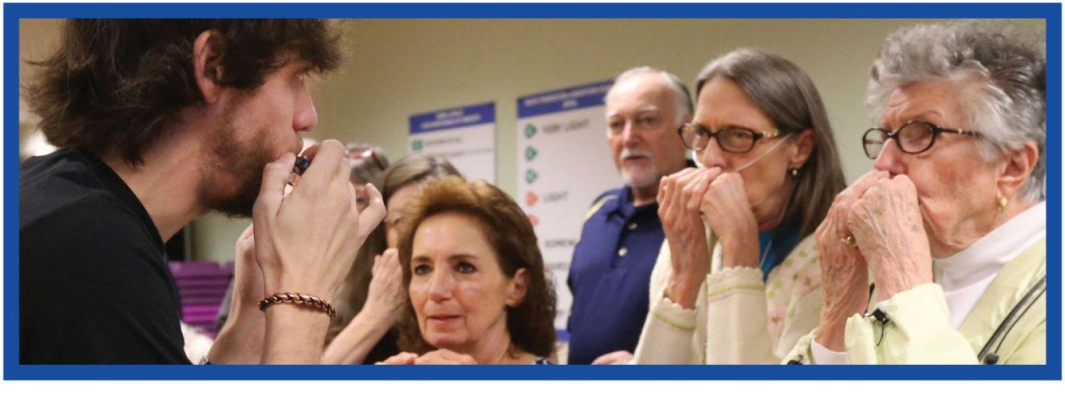
Step #1 - Air/Oxygen: Music is Oxygen for the Soul

COPD360music
HARMONICAS FOR HEALTH

- Learn how to have better control of your breathing
- Exercise the muscles that help move air in and out of the lungs
- Strengthen abdominal muscles for a more effective cough

Reported benefits include: decreased shortness of breath, increased sputum mobilization and increased quality of life.





Learn more at:
copdfoundation.org
breathestrongamerica.org

Step #1 - Air/Oxygen: The Breather

THE BREATHER®

#1 Best Selling Respiratory Muscle Trainer

- Strengthens inspiratory and expiratory muscles
- Promotes diaphragmatic breathing
- Generates improved airflow through vocal folds
- Reduces shortness of breath

20% Off When You Use The Coupon Code
BreatheStrong
at pnmedical.com

The Breather is an Inspirator / Expiratory Respiratory Muscle Training device (RMT) which improves health and quality of life by promoting regained activity and exercise tolerance.

PNMEDICAL

Learn more at **pnmedical.com**

ACTION STEP #2

You can only live a few weeks without...

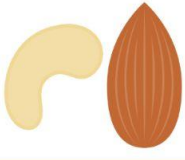
Water / Food: Eating Right For Healthy Lungs / Heart

People usually use 36 to 72 calories per day on respiratory muscles.

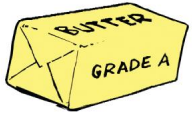
People with COPD use up to 360 to 720 calories per day.

Keep your energy up and get needed nutrients by consuming enough calories while still eating healthy foods.

Whole Milk	**Concentrated source of carbohydrates, protein, and fat,** whole milk provides calcium and vitamin D. Whole milk can be important in fighting osteoporosis. Milkshakes, fortified milk flavored milk, and cheese are additional good choices.
Nut Butter	**Just 2 tablespoons of nut butter contains about 8 grams of protein** as well as about 8 grams of healthy monounsaturated fat; almond butter and tahini (from sesame seeds) are some good choices.
Unsalted Nuts & Other Healthy Fats	**If you eat an ounce, you've eaten about 170 calories;** skip nuts that are roasted or otherwise flavored because they tend to be loaded with sodium. Olive oil and avocados are two other good sources of healthy fats for a COPD diet.
Apples	**Apples are powerhouses packed with vitamins and minerals** as well as concentrated carbohydrates, especially if eaten dried; applesauce and apple juice are other good choices.



STEP #2 - Water / Food - Eating Right For Healthy Lungs

Soup & Other Beverages	**Get enough fluids throughout the day** (to help keep secretions loose and airways more supple) with soups, and most fruits; avoid soda and similar sweetened beverages with empty calories.	
Greek Yogurt	**Use as an alternative to sour cream,** as a snack, as a side dish, or as a dessert, with 16 grams of protein in a 6 ounce serving vs. 8 grams in an 8 ounce serving of regular yogurt.	
Fish & Other Fats	**Fish is a great source of protein** as well as a nutritious way to provide necessary calories and variety in your diet. Lean meat, poultry, eggs, nuts & dried beans are other great protein options.	
Butter & Other Fats	**Butter (not margarine), and other fats,** can help provide additional calories in your diet. Cream cheese, regular salad dressings, dips and sour cream are other options available at the store. Olive oil and peanut oil can be used instead.	
Smoothie Ingredients	**Smoothies can be a combination** of all kinds of fruits, veggies, milks, yogurts, and proteins as a concentrated source of calories, fat, carbohydrates, and vitamins and minerals; add extra calories with nut butter or avocado, etc.	

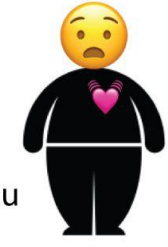
Improve Your Lung Health, Fill Up On These Foods!

ACTION STEP #2 Watch Your Weight - In Both Directions

The right diet and nutrition assessment is a vital part of YOUR Action Plan.

People with Chronic Bronchitis

have a tendency to have excess body weight, making your heart and lungs work harder and more difficult to breathe.



Your doctor or dietitian can advise you on how to achieve a healthier body weight by following a customized eating plan and the right exercise program.

People with Emphysema

have a tendency to be underweight. If you're underweight, you may feel weak, tired and be more prone to infections.

You will need to include healthy, high-calorie snacks in your diet, including: Milk, eggs, oats, quinoa, beans, cheese, avocado, nuts and nut butter, and healthy oils.

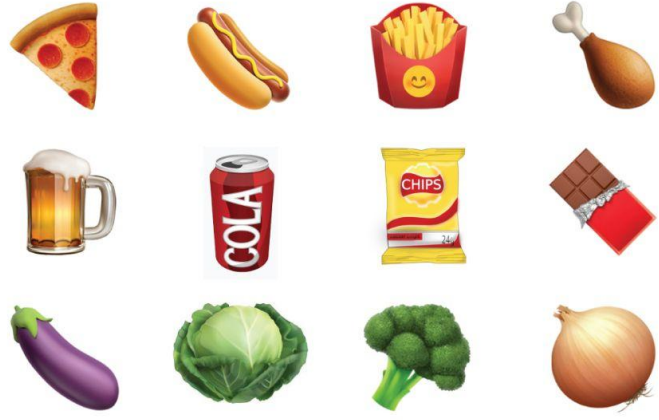
Make mealtime easier • Choose a quick and easy food plan
Eat your main meal early • Make enough for leftovers

ACTION STEP #2 Clean Up Your Kitchen To Breathe Strong

Make the most of every meal

- Make breakfast your main meal
- Eat a total of 6 small meals a day
- Make meals that you like
- Invite someone to eat with you
- Eat and chew slowly, pause occasionally, and put utensils down between bites
- Plan the next meal
- Enjoy your meal as much as your dessert
- Try to drink plenty of fluids throughout the day

Remove foods if they give you gas



Caffeine can block your medications. Consult your doctor.

Tips for Living With Heart Failure and Lung Disease

Monitoring Your Daily Weight:

- Weigh first thing in the morning, unclothed, after your first urination, using the same scale.
- Call your Healthcare Provider if you note **weight gain of 2lb or greater** - you are likely retaining fluid and may need to adjust your medication (diuretic "water pill").
- Slight weight increase often occurs before **shortness of breath** or other severe symptoms

Avoiding Salt Intake

- Any dietary salt increases **fluid retention** in your body, worsening heart failure easily.
- This is a **KEY factor** that you can work to control and improve your symptoms.
- Canned foods, frozen foods, restaurant foods, cheese, and processed foods contain lots of sodium. The best foods are **fresh fruits, vegetables, legumes, and grains** cooked at home.

Light Exercise and Rest

- Important to group your activities together as much as you can, rest between activities, and do low level exercises to keep mobility and circulation of blood moving.

Understanding Heart Failure and Lung Disease

Heart Failure is a type of chronic disease in which your heart is not pumping enough blood to the rest of your body.

- The blood backs up into your lungs and other parts of your body.
- Chronic in that the symptoms can come and go, depending on the severity, treatments, and lifestyle choices.
- There are several types of heart failure and the severity can range from mild to severe.

Frequent Causes and Risk Factors:

- Heart Disease and Heart Attack
- High blood pressure
- Arrhythmias causing extra workload on the heart
- Faulty Heart Valves
- Damage to the heart muscle (cardiomyopathy) from toxins (Drugs, alcohol, infections)
- Inflammation of heart muscle (myocarditis) from viral causes

.

CHF - PAF - Hypertension

- **Heart Failure, also known as "CHF" or "Congestive Heart Failure"**

  Similar to COPD and PF, this often presents with shortness of breath and fatigue.

- **Atrial Fibrillation, "Afib" or "PAF, Paroxysmal Atrial Fibrillation"**

  Irregular heartbeat. Often presents when the body is under stress with shortness of breath, palpitations, or chest pain.

- **Hypertension, also known as "High Blood Pressure"**

  People with COPD and PF have a high incidence of hypertension.

  It can elevated without even knowing it, known as "The Silent Killer."

  Can lead to to stroke, heart attack, heart failure and other complication.

Diabetes with COPD / Pulmonary Fibrosis

Low blood oxygen is thought to likely worsen diabetes.

- Diabetes, when uncontrolled, can worsen COPD and PF symptoms with increased fatigue, chest pains, lower immune system and high rates of infections.

- It is important to be aware of this, monitor your blood sugar, and work with your healthcare provider to balance your inhaler medications for diabetes control and COPD management.

- Whole foods, fresh fruits and vegetables, beans and legumes are also optimal foods to help control diabetes with COPD and PF.

- Exercise as tolerated is also helpful in maintaining control of diabetes.

ACTION STEP #3

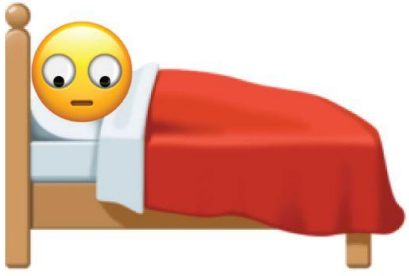
After about a week with no sleep, you will go insane...

Sleeping Well: Important Tips

- Get daily exercise.
- Eat well, especially foods with magnesium and B complex vitamins.
- Establish a sleep routine - go to sleep and wake up at the same time every day.
- Open your airways with medications.
- Talk to your doctor about using oxygen therapy, especially if your oxygen saturation levels are low.
- Get tested for sleep apnea.
- Consult with your doctor about the medications you are currently taking.
- Avoid smoking and limit your intake of caffeine and alcohol.

ACTION STEP #3

COPD, Pulmonary Fibrosis & Sleeping Issues



Low oxygen levels in the blood can damage your heart and other organs

COPD and PF can cause a low level of oxygen in the blood at different times during the night. This can result in poor quality of sleep, and you may feel tired during the day.

Your doctor can carry out tests to find out if low levels of oxygen in the blood are causing the sleeping problems. If so, you may need to have oxygen therapy during the night.*

*Note: Covered by Medicare / Insurance.
An overnight pulse oximetry test is required.

ACTION STEP #4

Without Play/Exercise, you will become sick...

Play, Exercise and Start Walking Today!

Activities of Daily Living

Stand More and Sit Less

Yoga

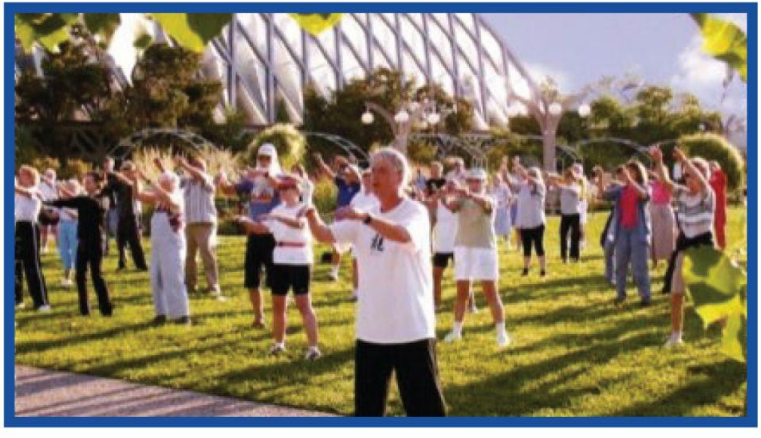
Fun "Stealth" Activities

Vibration Platform

Dance Whenever You Can

Tai Chi

View Our BREATHE STRONG WITH TAI CHI Webinar



The Benefits of Tai Chi at Home

- > Breathing
- > Heart Function
- > Blood Pressure
- > Balance
- > Calming
- > Flexibility
- > Coordination
- > Energy

Experience for yourself the accumulated wisdom of centuries with the timeless exercise of Tai Chi. Improve your breathing, blood pressure and balance, feel more energy, and sleep better. Learn to use your Tai Chi to alleviate chronic stress, and everyday aches and pains.

HEALTH Exercises at

breathestrongamerica.org

ACTION STEP #4

Without Play/Exercise, you will become sick...

Play, Exercise and Start Walking Today!

Breathe Right
Breathe Strong

Breathe in

Breathe out

Learn to Breathe Before You Walk

A. Keep your heart rate within prescribed limit

B. Learn proper breathing patterns

C. Use pursed-lip and belly breathing

D. Stop to check your breathing patterns

E. Ask what medications or inhalers you should use before exercise.

This plan is only a suggestion and may not be appropriate for everyone. Please ask your physician for approval.

Week 1

A. Walk at a slow pace for **5 minutes.** Then stop and rest. Walk back. **(10 minutes total walking time)**

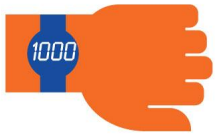
B. Check your breathing pattern to be sure it is correct. If it is not, slow down or stop and rest.

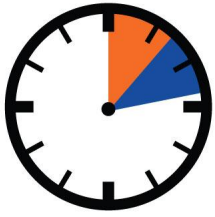
Week 2

Increase walking time to **7 minutes.** Then stop and rest. Walk back. **(14 minutes total.)**

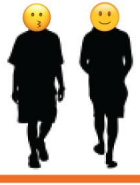
Use a pedometer to keep track of your step count.

Walk a minimum of 1000 steps in your home every day.



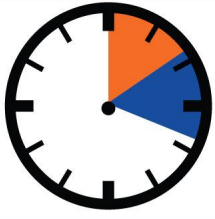


Week 3



Increase walking time to **9 minutes.**
(18 minutes total.)

Do not walk and talk at the same time.



Week 4

Increase walking time to **12 minutes.**
(24 minutes total.)

Use a pedometer to keep track of your step count.

Week 5

Increase walking time to **15 minutes.**
(30 minutes total.)

Use a fingertip pulse oximeter to monitor your heart rate.

Keep your heart rate within prescribed limit.

ACTION STEP #5

Without a plan, you will become sicker, know your...

Action Plan for Bad Breathing Days

How You Can Tell If You are Having a Bad Breathing Day

A. Shortness of breath

B. Difficulty completing daily activities

C. More coughing / wheezing

D. Mucus is thicker and discolored

E. May have trouble sleeping

F. Low-grade fever

G. Feels like I am catching a cold

BREATHE STRONG AMERICA NON-PROFIT

STEP #5 - Bad Breathing Day - Plan of Action to Stay Out of the Hospital

- I will limit my activity and use pursed-lip breathing

- I will take regular medications as prescribed

- I will check my temperature

- I will check my heart rate and oxygen level with an oximeter

- I will call my doctor to get special medications (rescue inhaler)

- I will call a friend and let them know my condition

ACTION STEP #6

You can extend your lifetime with...

An Effective Care Team

YOU'RE THE CAPTAIN

TOTAL CARE TEAM

Primary Care Physician

Your primary doctor can diagnose and treat mild COPD. They can also refer you to a pulmonologist.

Nurse Practitioner/Physician Assistant

Provides a range of healthcare services, including prescribing medications, ordering tests, diagnosing conditions and education.

Pharmacist

Practices medicine assisted by the physician, including ordering tests, diagnosing conditions, prescribing medications and education.

Registered Dietician

Helps keep your energy up by planning healthy meals to manage your weight and strength.

RESPIRATORY CARE TEAM

Pulmonologist

Treats and manages moderate to severe COPD, which includes diagnostic studies and tests.

Respiratory Therapist

Trained professionals that manage lung disorders. They perform lung function tests, rehabilitation, breathing techniques and counseling.

Lung Health Navigator

Trained specialists that work with lung diseases. They can provide inpatient and outpatient education and coordination.

Psychiatrist / Psychologist

Trained to help people with COPD cope with emotional effects of the disease.

STEP #6 - Doctor Checkup Checklist

Things to ask your doctor and other members of your healthcare team:

- [ ] **Ask** if you are eligible for a pulmonary rehabilitation program or telerehab at home

- [ ] **Ask** about what medications or inhalers you should take before exercise

- [ ] **Ask** about the amount of steps a day you should walk (1000-5000 a day)

- [ ] **Ask** about triggers/irritants (things that make your COPD/PF worse) and how to deal with them

- [ ] **Ask** about upcoming travel plans with your doctor (flying at high altitudes, oxygen needs)

- [ ] **Ask** about a rescue inhaler for your exacerbation / COPD flare-up

- [ ] **Ask** if there are any clinical trials available in your area that you could get involved with:
  Learn more at: copdfoundation.org • pulmonarytrials.org • breathestrongamerica.org

You should do the following at least once a year:

- [ ] **Check** with your doctor about a spirometry test (% of lung capacity)

- [ ] **Discuss** any educational needs regarding your health with members of your healthcare team

- [ ] **Have** a complete physical exam

- [ ] **Review** and update your Step #5 Action Plan

- [ ] **Ask** your healthcare practitioner about the flu shot and pneumonia vaccine

ACTION STEP #7 Purpose - The Key

Without purpose, life is an empty, short-lived existence.
The "why" behind everything we do.
Having a reason for living.
Let go of being a "knower" of 1% that you know.
Embrace living as a "learner" of the 99% that you don't know.

"I'm not convinced that your date of death is the date carved on your tombstone. Most people die long before that. We start dying when we have nothing worth living for. And we don't really start living until we find something worth dying for. Ironically, discovering something worth dying for is what makes it worth living."

-Mark Batterson

Karen Deitemeyer's Breathe Strong Journey

- **1991** - At 45 years old Karen experienced shortness of breath
- **1992** - Diagnosed with Emphysema and decided to **STOP SMOKING**
- **2003** - Diagnosed with COPD and started on Oxygen 24/7
- **2007** - Started Pulmonary Rehab and learned breathing techniques
- **2008** - Became a Patient Advocate
- **2015** - Joined a Breathing Club
- **2021** - For the past 30 years Karen has lived with COPD and still going strong!

We believe Karen is winning the COPD BATTLE!

Start your battle plan...Today!

Read more about Karen's journey at
breathestrongamerica.org

BREATHE STRONG AMERICA NON-PROFIT

"I'm loving life - and COPD can't stop me"

COPD MEDICATIONS

Aerosol Treatment can be delivered through:

1. Pressurized Metered-Dose Inhaler (MDI), Dry-Powder Inhaler (DPI), and **Soft-Mist Inhaler (SMI)** — these are portable, hand-held devices that you can carry in your purse or pocket.

2. Small-Volume Nebulizer (SVN) — a portable device that has a small plastic tube and cup (nebulizer) that connects to a small machine that pumps air (air compressor). Liquid medications are put into the cup and the machine makes the liquid into an aerosol.

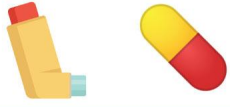
PULMONARY FIBROSIS MEDICATIONS

Nintedanib (OFEV) anti-fibrotic drug and

Pirfenidone (Esbriet) anti-fibrotic and anti-inflammatory drug have been shown to slow the decline in lung function in mild-to-moderate idiopathic pulmonary fibrosis.

Chronic bronchitis with PF may occur and you may need to use an inhaler medication to open your airways.

Note: It is important to discuss drug therapy with your physician.



Being short of breath (SOB) is not necessarily an indication of whether your body is getting sufficient oxygen. SOB is an indication that your lungs are struggling to provide your body with sufficient oxygen. Before being prescribed supplemental oxygen you may want to purchase a finger pulse oximeter, a device that will help you to monitor your blood oxygen saturation and heart rate to safely exercise.

Oxygen Therapy may help COPD and PF while walking and exercising:
If there isn't enough oxygen in your blood, you may need supplemental oxygen. There are several devices to deliver oxygen to your lungs, including lightweight portable units. Review **ABCs of Portable Oxygen** in the back of this guide.

Know The ABCs Of Inhaled Medications

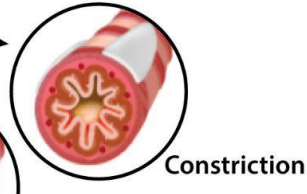
(A) Clinical Assessment

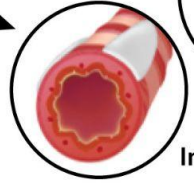
Physician determines medication need (Types of medicine)

Beta2 Agonists (promotes opening of airways)

Anticholinergics (prevents narrowing of airways)

Corticosteroids (inflammation of airways)





(B) Financial Assessment

Pharmacy / Insurance coverage for types of medicine (Rescue - 12hr - 24 hr)

Cost Per Dose	$ - Less than $1	$$ - $1-$2	$$$ - $2-$3	$$$$ - $3-$4	$$$$$ - $5-$10	$$$$$$ - $11-$15

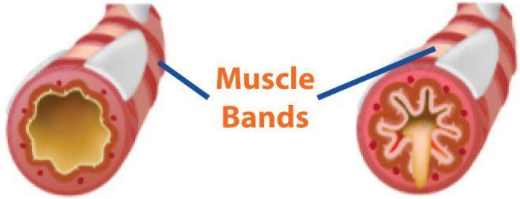
(C) Educational Assessment

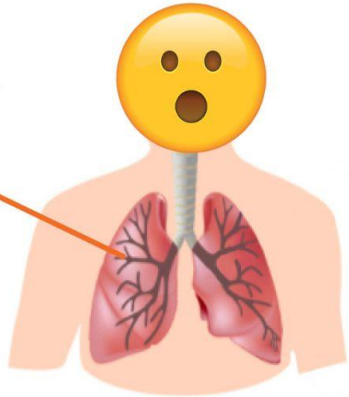
Team up with a Respiratory Therapist to determine best device for patient (performance / preference based)

4-8 Hour Short Acting Inhaler Medications

Anticholinergic	Anticholinergic / Beta Agonist	Beta Agonist				
$$ *	$$	$ *	$$ *	$ *	$	$ *
Atrovent	Combivent	Proventil	Xopenex	ProAir HFA	ProAir Respiclick	Ventolin

The airways that let air in and out of the lungs swell and become clogged.





These inhalers relax muscle bands

* Use a spacer with these inhalers.

A. These are the ones you use when you're having a hard time breathing.

B. How often you're using these helps determine how to adjust your controller medications.

C. You should expect these to work within a few minutes. Most can be repeated within a minute or two. If a repeat dose still doesn't bring relief, you should contact your doctor.

For more information on cleaning instructions please visit breathestrongamerica.org

Inhaled Medication Questions For Your Doctor

Is The Inhaled Medication Device Meeting My Needs?

- ✓ Disease Severity
- ✓ My Age
- ✓ My Physical Ability
  - > Vision
  - > Hearing
  - > Dexterity
  - > Strength
- ✓ Cognitive Ability
  - > Do I Understand The Drug?
- ✓ My Preference

Did I Have Input On The Right Device for Me?

- ✓ Availability
- ✓ Cost
- ✓ Reimbursement
- ✓ Convenience
  - > Ease of use
  - > Portability
  - > Size
  - > Shape
  - > Treatment Time
  - > Cleaning
  - > Maintenance

Did I Get Proper Inhaled Medication Device Training?

- ✓ One-on-One Training
- ✓ Effective Instructions
- ✓ Hands-on Training
- ✓ Personalized Labeling
- ✓ Good Follow-Up

BREATHE STRONG AMERICA NON-PROFIT

The ABCs of 12 Hour Long Acting Inhaler Medications

Anticholinergic

$$$$$

Tudorza

$$$$$

Seebri

Beta Agonist

$$$$$

Serevent

*

$$$

Serevent

Anticholinergic / Beta Agonist

*

$$$

Bevespi

$$$$

Utibron

$$$$$

Duaklir

Corticosteroid

$$$

Flovent Diskus

$$

Flovent HFA

*

$$$

Alvesco

$$

Pulmicort

*

$$

QVAR

$$$$$

QVAR Redihaler

Beta Agonist / Corticosteroid

$$$$$

Advair

*

$$$$

Advair

$$$

AirDuo RespiClick

*

$$$

Dulera

*

$$$

Symbicort

Cost Per Dose	$ - Less than $1	$$ - $1-$2	$$$ - $2-$3	$$$$ - $3-$4	$$$$$ - $5-$10	$$$$$$ - $11-$15

The ABCs of 24 Hour Long Acting Inhaler Medications

Anticholinergic

$$$$$$

Incruse Ellipta

$$$$$$

Spiriva HandiHaler

Anticholinergic / Beta Agonist

$$$$$$

Anoro Ellipta

$$$$$

Stiolto Respimat

Beta Agonist

$$$

Striverdi Respimat

$$$$$

Arcapta Neohaler

Beta Agonist / Corticosteroid

$$$$$

Breo Ellipta

Anticholinergic / Beta Agonist Corticosteroid

$$$$$$

Trelegy Ellipta

Corticosteroid

$$$$$

Arnuity Ellipta

$$$$$

Asmanex HFA

A. These are ones you use every day regardless of how you're feeling.

B. We use these to help you avoid having to use your rescue medications.

C. You should not expect these to work right away.

D. These medications are usually well-tolerated but some people experience:

• Dry mouth • Runny nose • Scratchy throat • Dizziness

Cost Per Dose With No Insurance

$$$

Affordable Respiratory Nebulizer Medication Options

Are you out of BREATH AND out of MONEY?

PART B DRUGS WILL SAVE YOU MONEY!

Albuterol • Duoneb • Pulmicort • Brovana • Perforomist

These medications are used in the devices below.
Call your pharmacy or provider to learn more.

Some of your respiratory drugs like Albuterol, DuoNeb, Pulmicort are cheaper through your Medicare Part B benefit; other prescriptions that use a combination of long acting bronchodilator drugs (controller meds like Breo, Stiolto, Anoro, Spiriva) are cheaper through Medicare Part D benefit. Consult your insurance provider, and also ask if you qualify for a low income subsidy (LIS).

Flyp Pocket
Mesh Nebulizer

Pocket Neb

For People who suffer from
Asthma, COPD, Emphysema or Bronchitis

Treatment in 7-8 minutes.
Nebulizes all liquid respiratory medication.
Pocket size easy to carry. Liquid will not leak out.

Take your treatment at work or before any activity
Replaces your inhaler at a fraction of the cost $

Pari Trek S

General Nebulizer Cleaning Instructions

After each use - Rinse nebulizer cup and mouthpiece with warm running water. Shake off excess water. Air dry.

Daily - Wash nebulizer parts in warm water with liquid soap. Rinse. Disinfect parts with 1 part white vinegar and 3 parts distilled water. Soak for 60 minutes. Rinse all parts with warm water. Shake off excess water. Air dry.

Know the ABCs of Short and Long Acting Nebulizer Medications

"Drugs don't work if patients don't take them (properly)"

Former US Surgeon General
C. Everett Koop MD

4-8 Hour Duration (Short Acting)

Anticholinergics	Ipratropium Bromide
Beta Agonists	Albuterol or Xopenex
Anticholinergic / Beta Agonist	Duoneb

12 Hour / Twice a Day (Long Acting)

Anticholinergic	Lonhala Magnair
Beta Agonist	Brovana or Perforomist
Inhaled Corticosteroid (ICS)	Pulmicort

24 Hour / Once a Day (Long Acting)

Anticholinergic	Yupelri

Always take your long acting medications at the same time every day, and carry a fast acting inhaler to reduce exacerbations and visits to the emergency room.

COPD OXYGEN NEEDS

Mild Needs

Discuss with your physician your supplemental oxygen needs for exercise, activity, travel, and high-altitude as possible needs.

Moderate Needs

Oxygen at 2 to 3 liters while sleeping delivered by a home oxygen concentrator and may require oxygen while walking on pulse flow settings from 2 to 4.

2 liters to 3 liters

Advanced Needs

24/7

Prescribed oxygen 24 hours a day at 3 to 5 liters, and requires continuous flow oxygen while walking, set on 4 to 5 liters continuous flow or pulse flow settings 4 to 7 on a transportable concentrator.

PULMONARY FIBROSIS OXYGEN NEEDS

Mild Needs

Initial needs for oxygen may vary with close monitoring of oxygen saturation levels with breathing, activity, and intermittent portable supplemental oxygen.

2 liters to 3 liters

Moderate Needs

Oxygen required while walking 2 to 4 liters continuous flow via a portable oxygen bottle or 5 to 6 pulse flow using a portable concentrator.

2 liters to 5 liters

Advanced Needs

24/7

Prescribed oxygen 24 hours a day at 3 to 5 liters. Will require continuous flow oxygen on settings 4 liters or more to maintain blood oxygen levels above 90%.

4 liters to 5 liters

Oxygen Therapy Can Help Maintain Your Heart and Lung Functions

You May or May Not Need

OXYGEN

At some point you may be prescribed oxygen. Although you will feel breathless while you are have an ***EXACERBATION*** and feel you need oxygen, it still may not be the appropriate time for oxygen therapy. Only a series of tests will confirm if you qualify.

Benefits of Oxygen Therapy

Oxygen Therapy

In addition to reducing breathlessness and fatigue, supplemental oxygen can help reduce stress on all your organs, and increase your ability to maintain an active lifestyle.

Oxygen is not addictive.

How Do I Qualify For

OXYGEN

Conditions for Which Oxygen Therapy May Be Covered by Medicare and Insurance

A. When arterial oxygen saturation is at or below 88%, taken during sleep, while awake, or taken during exercise and there are signs reasonably attributable to hypoxemia.

B. With one of the following conditions: severe lung disease such as COPD, interstitial lung disease, cystic fibrosis, bronchiectasis; widespread pulmonary neoplasm, pulmonary hypertension, pulmonary fibrosis, congestive heart failure due to chronic cor pulmonale, erythrocytosis, impairment of the cognitive process, nocturnal restlessness, and morning headache.

Fingertip Oximeter

Know the ABCs of Home Oxygen Concentrators

1

Oxygen Concentrator Purity

A. Concentrator Purity Percentage: 86% to 94% pure oxygen

B. Alarms: All concentrators will alarm at 85% purity

C. Process: Oxygen is separated from 21% room air

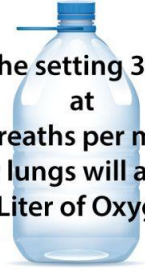
CONTINUOUS FLOW ONLY

LOW % OXYGEN

Doctor's order for oxygen must be a minimum of 2 Liters to meet the requirement for Medicare monthly reimbursement.

Stationary Home Oxygen Concentrators Made in the U.S.A.

Models 20 to 30 Pounds (Delivers 1 to 5 Liters) or 40 to 50 Pounds (Delivers 1 to 10 Liters)



On the setting 3 Liters at 20 breaths per minute Your lungs will absorb 1 Liter of Oxygen

Breathe Strong Guide Special Pricing! Call OxiMedical.com 888-239-7196

2

Your Cost -- Utility Company

A. Power Cost: Ranging from $30 to $40 a month.

B. Utility Company: Check with your utility company for discounts and emergency response.

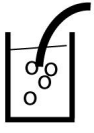
3

Home Concentrator Maintenance

A. Oxygen Delivery: On the setting 3 liters or lower you may not need a humidifier bottle.

B. Filter: Replace internal filter every 18 to 22 months. Clean external intake filter monthly

C. Flow Test: Place tip of cannula in glass of water or use a flow tube tester



4

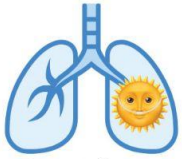
Cannula -- Tubing -- Safety

A. Cannula: The nose piece needs to be replaced (minimum) every 30 days

B. Tubing: Replace the 25 and / or 50 ft tubing once a year

C. Fire Safety: **NO** Candles – **NO** Cigarettes – **NO** Open Flame

There are Three Types of Portable Oxygen Systems



Daytime Oxygen

Bottled Oxygen Gas.....Available in all areas.....**Not Airline Approved**

Portable Oxygen Concentrator.....Not available in all areas.....**Airline Approved**

Get the Right Portable Oxygen System to Keep You Active

Bottled Oxygen System

Continuous and Pulse Delivery

5-7 Pounds

Portable Oxygen Concentrator

Pulse Delivery Only

3-6 Pounds

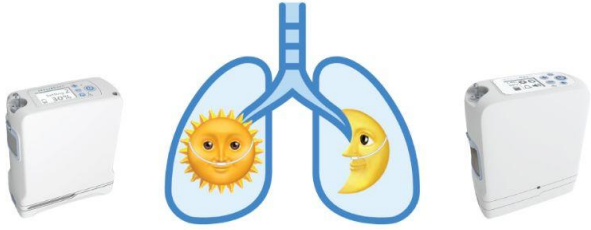
Transportable Oxygen Concentrator

Continuous and Pulse Delivery

10-18 Pounds

All Portable Oxygen Concentrators Are Not Equal!

CARRY PORTABLES 3 to 5 lbs
Daytime Oxygen



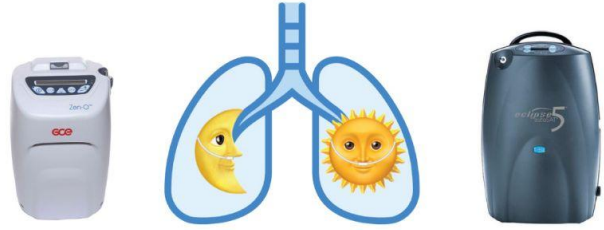
4 Pulse Settings
Not recommended for sleeping

Mild
Oxygen Use
2 Liters Or Less

6 Pulse Settings
Get doctor's OK for sleeping

Moderate
Oxygen Use
3 Liters Or Less

CART PORTABLES 9 to 15 lbs
Night or Daytime Oxygen



6 Pulse Settings or 2 Continuous Settings

Severe
Oxygen Use
4 Liters Or Less

9 Pulse Settings or 3 Continuous Settings

Advanced
Oxygen Use
5 Liters Or Less

Which Portable is Right For You? The Answer is Always at the End of your Finger

Use a finger tip oximeter to set your portable oxygen on the right setting to keep yourself active. Stay Above 90%.

Learn more about POCs at breathestrongamerica.org

Under What Conditions Would You Purchase a Portable Concentrator?

1 **The patient requires oxygen while sleeping at 2 or 3 liters** continuous flow and does not require oxygen while awake, but may need oxygen when active or flying at high altitude.

2 **The patient requires oxygen while sleeping and awake at 2 to 3 liters** continuous flow, has been tested on a pulse/demand regulator oxygen bottle, and finds it difficult to carry bottles which run out in the middle of their activities.

3 **The patient's activity level includes** automobile travel which prohibits the extended use of oxygen tanks but is accessible with the use of a portable oxygen concentrator that can be plugged into the DC car outlet.

4 **The patient's home care dealer will not provide a portable** that meets patient's needs, due to low reiumbursement from Medicare/insurance.

Information You Need To Know Before Flying

1. All airlines require a minimum of two batteries.
NOTE: For a 4 hour flight, you need 6 hours of battery time.

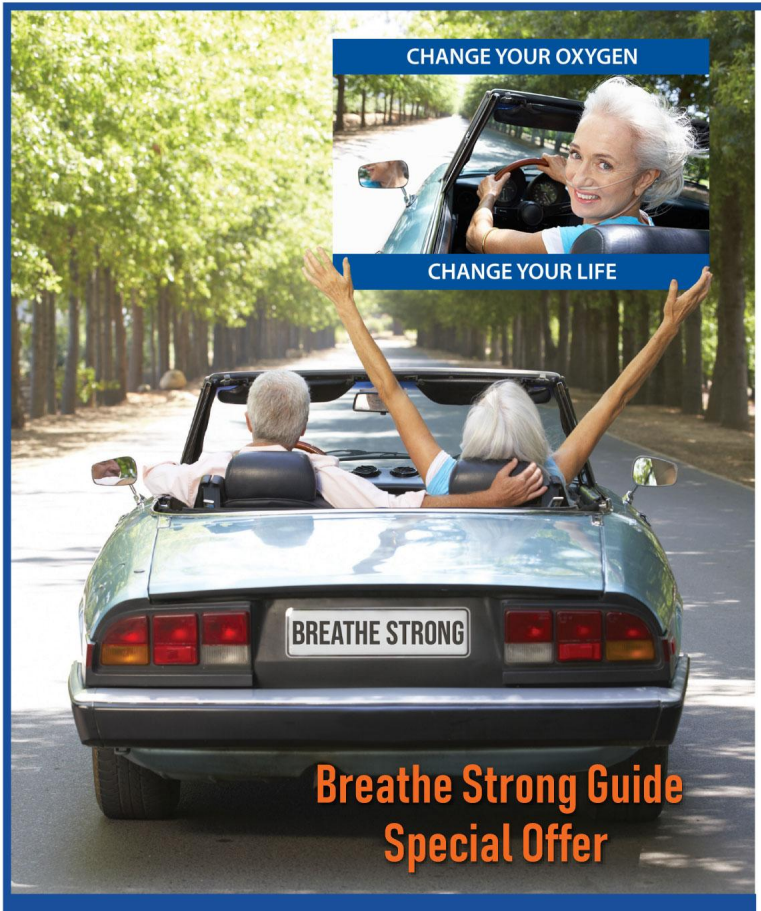
2. Your Portable Oxygen Concentrator must have a label in red reading:

The manufacturer of this POC has determined that this device conforms to all applicable FAA requirements for POC carriage and use on board aircraft.

3. Use a fingertip oximeter to set your portable oxygen on the right setting to keep your blood oxygen above 90%.

Your doctor may request a high altitude test before flying or mountain travel.

Learn more at: breathestrongamerica.org



Call OxiMedical.com 888-239-7196

Test Drive Your Portable Concentrator For 30-Days Risk Free

We understand that purchasing an portable oxygen concentrator is an investment, and you want to be sure to get the one that is best for you.

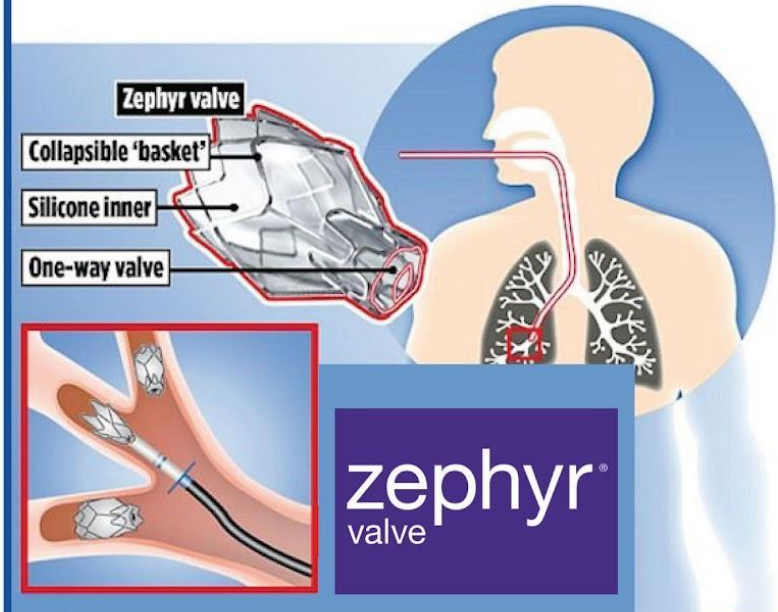
If you're not sure which portable concentrator is right for your needs, try our 30-Day Test Drive.

System Includes:

- 5 Flow Settings
- Only 4 Lbs
- 8 Hour Battery
- Very Quiet
- 5 Year Warranty
- Free Shipping
- Free Oximeter

Zephyr Stent Valve

Can Improve Breathing in Some Patients With Severe Emphysema



Zephyr Valves are small, minimally-invasive valves that are placed in damaged lung airways.

Once in place, these valves block damaged regions, allowing healthy lung regions to work more efficiently.

During inhalation, Zephyr valves close, which prevents air from entering the damaged part of the lung.

For more information, visit www.MyLungsMyLife.com
To find a Zephyr Valve Treatment Center near you, call: 866-300-4550

Treating your COPD and still struggling?

Chronic productive cough?
Repeated antibiotic use for chest infections?

These may be indicators of bronchiectasis—a common but frequently undiagnosed condition caused by chronic inflammation of the airways.

Half of people with serious COPD may have bronchiectasis.

50%

inCourage® Airway Clearance Therapy is a drug-free way to clear excess mucus from the lungs.
Ask your doctor if the inCourage System may be right for you.
For more information about bronchiectasis, call 1-800-793-1261 or visit www.respirtech.com/be.

We change lives. We help people breathe better.

RespirTech® | inCourage® Airway Clearance Therapy

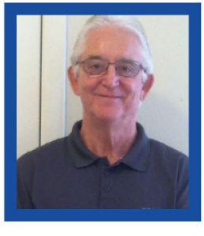
COPD Breathe Strong - Our Team and Mission

Dr. Keith Robinson, MD MS FCCP *Breathe Strong Medical Advisor*

Dr. Robinson is board certified in Pulmonary/Critical Care Medicine. He is the Medical Director of Syneos Health since February 2020, and leader of technology-patient centered research for world class health outcomes. Dr. Robinson is also a member of the Baptist Health Quality Network and serves as an Associate Clinical Professor at Florida International University, Wertheim College of Medicine in Miami, Florida.

Karen Deitemeyer *Patient Advisor*

Karen was officially diagnosed with COPD in 2001. She is a Florida State Advocacy Captain for the COPD Foundation; a member of the Governing Board of the COPD PPRN; Secretary for the U.S. COPD Coalition Board; and a member of the ALA National COPD Patient Advisory Group. She was the patient "face" for the DRIVE4COPD Campaign. Karen was a speaker for the 2014, 2015 and 2017 ALA Lung Force Expos.



Bob Sobkowiak, RRT, TTS *Breathe Strong Coalition Coordinator*

Bob is a former US Air Force Medic, trained to become an RRT. For over 40 years Bob has served in areas of Clinical Acute Care, Management, Education, Pulmonary Rehabilitation, Home Care, and as a volunteer with the ALA and COPD Foundation. Bob has served as a Florida COPD Coalition Coordinator since 2010, and is currently a Florida COPD State Captain, and Coordinator for Breathe Strong America.

Mission Statement

Breathe Strong Paving the Way for Lung / Heart Health Self-Management Through Partnership With a Community of Patients, Providers and Industry. Mentoring Our Pulmonary Community Through Engagement and Empowerment.

If You Can Breathe, You Can Breathe Stronger!

BREATHE STRONG AMERICA NON-PROFIT

breathestrongamerica.org
facebook.com/breathestrongamerica

Thank you! Breathe Well! Make it a GREAT Day!

Breathe Strong America is a 501(c)3 non-profit organization
6th Edition Copyright ©2021 Breathe Strong America

Live Education Webinar
View at breathestrongamerica.org