

## COVID-19 rapid Nice guideline summary: community-based care of patients with chronic obstructive pulmonary disease

Summary of [Nice national guideline NG168, April 2020](#)

Patients with chronic obstructive pulmonary disease (COPD) are at increased risk of severe illness from COVID-19, particularly those with:

- past history of hospital admission
- the need for long-term oxygen therapy or non-invasive ventilation
- limiting breathlessness
- the presence of frailty and multimorbidity.

All COPD patients should be advised to continue with their prescribed inhaled and oral medications in line with their self-management plan. Signpost to [asthma.org.uk](http://asthma.org.uk) for inhaler technique videos.

Patients with severe COPD who received a letter letting them know they are at high risk of severe illness from COVID-19 should be advised to follow the advice from the UK government on [shielding and protecting people defined on medical grounds as extremely vulnerable to COVID-19](#).

### Treatments

COPD treatments	Recommendations
<b>Corticosteroids</b>	Inhaled corticosteroids (ICS) should be continued as normal. There is no evidence treatment with ICS for COPD increases the risk associated with COVID-19. Long-term oral corticosteroids should be continued at the prescribed dose.
<b>Self-management of exacerbations</b>	Patients should follow their own treatment plan for exacerbations of COPD. Treatment with oral corticosteroids and/or antibiotics should be initiated ONLY if it is clinically indicated.
<b>Smoking cessation</b>	Recommend smoking cessation to reduce exacerbations and risk from COVID-19. See <a href="#">Nice guidelines for evidence-based interventions</a> and consult <a href="#">NHS Stop smoking services</a> for further information.
<b>Pulmonary rehabilitation</b>	See the <a href="#">British Thoracic Society pulmonary rehabilitation</a> resource pack for self-management, home exercise and educational materials.
<b>Oxygen</b>	Patients using long-term oxygen therapy should not adjust flow rates. Patients with ambulatory oxygen (portable oxygen allowing patient to stay active) should not use it at rest or in the home.
<b>Oral prophylactic antibiotic therapy</b>	Not recommended to reduce risks from COVID-19. Patients already prescribed prophylactic antibiotics should continue taking them as prescribed.
<b>Airway clearance</b>	Patients should continue current airway clearance techniques. Advise that clearing sputum can generate potentially infectious aerosol and take appropriate precautions eg use well-ventilated room away from friends and family.

### Equipment

Advise patients on the following regarding COPD equipment:

- To wash hands and equipment (eg spacers, peak flow meters) regularly with washing up liquid following the manufacturer's instructions
- Not to share inhalers or devices with anyone else
- That nebulisers can be continued as normal
- That those currently receiving non-invasive ventilation at home should use a well-ventilated room away from friends as family.

To avoid disruption to the medicines supply chain, patients should be dispensed enough medication to meet their clinical needs for no more than 30 days. For inhalers this depends on the type of inhaler and the number of doses in the inhaler.