

Supported self-management for patients with moderate to severe chronic obstructive pulmonary disease (COPD): an evidence synthesis and economic analysis

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Plain English summary

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Chronic obstructive pulmonary disease (COPD) is a lung condition that affects about 5% of adults. Patients develop cough and breathlessness, which gets worse over time, and many patients also have 'flare-ups', which can lead to being admitted to hospital for a few days. Patients should try to manage their own health (self-manage) on a daily basis – exercising, eating more healthily, taking medications properly and learning to recognise and self-treat their 'flare-ups' early. The aim is to avoid going to hospital and to maintain better quality of life.

Guidelines recommend that general practitioners and nurses should support patients to self-manage but there is insufficient information about how best to do so. As patients who have just left hospital are at a high risk of being admitted again, one approach would be to introduce a programme of self-management support at this point. However, it is unclear whether this would work or whether it would be efficient financially for the NHS.

In this report, we drew together all available evidence and showed that self-management programmes provided soon after leaving hospital might reduce future hospital admissions and improve patients' quality of life, but the results were inconclusive. However, if better research were undertaken, and programmes were proven to reduce hospital admissions, the approach would be relatively cheap to implement.

We also explored which parts of self-management programmes were the most important, and found that those that included a specific exercise plan appeared to be the most beneficial but it was difficult to be sure about other aspects.

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