

## **CASE STUDY - COPD**

**Patient:** Martin, the year of birth 1958

**Laboratory values:** BP 130/84, pulse 102, temperature is now 37.8 ° C

### **Personal history:**

COPD, arterial hypertension, hypercholesterolemia, indicates that smoking 25 cigarettes a day (its 18 years), currently smoking 10-15 cigarettes a day

He comes to the pharmacy for advice. Indicates that a cold, often started coughing, coughing at night it bothers

### **Drug history:**

Spiriva 1 - 0 - 0

Ventolin every 4-6 hours as needed a breath

Indap 2.5 mg 1 - 0 - 0

Sortis 10mg 0 - 0 - 1

### **Tasks:**

1. Perform an analysis of prescription drugs, give active substance classification according to ATC classification, a brief mechanism of action of individual products, check the dosage and method of use (morning / evening, before / after meals, etc.)
2. What is the pathophysiology of COPD? There are differences in the treatment of COPD from asthma treatment?
3. You can recognize, or what criteria, whether the patient is cold or is it reflected in the exacerbation of COPD?
4. What is the procedure for acute exacerbation of COPD? Can you recommend a patient for example, increasing the dose or dosing frequency of any of the products they use? What other drugs can be used in acute exacerbation.
5. What is appropriate therapy for the treatment of patients recommend cold or high temperature and cough? Is it possible to suppress nocturnal cough?
6. If the patient needed help with addiction treatment in cigarettes, what options it can be recommended (including Rx drugs prescription)?