Computer guided consultation in COPD: Impact on guideline based management in general practice

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Background:
Delivering specialty quality care in general practice presents a significant challenge to the primary care team. We have developed a guideline based computer guided consultation that can facilitate COPD management and prompt clinical decision-making. We report the results of review of COPD patients using this system.

Patients and methods:
147 patients with COPD randomly selected from GP databases in 11 practices were fully assessed, mean (SD) age 64 (7), FEV1 1.89 (0.48), male 78. A trained respiratory nurse undertook the consultation with the lap-top screen placed between the nurse and patients. Changes and recommendations for interventions were recorded.

Results:
The consultations prompted a significant number of recommendations these included; smoking cessation no. of patients 47(32%), referral for oxygen assessment 13(9%) and recommendation for referral for rehab 35(24%). Altered prescribing including addition of short-acting beta agonist 33(22%), long-acting bronchodilator (LAB) 50(34%), long-acting beta agonist / inhaled cortico-steroid (LABA/ICS) 16,(11%) patients, change of device 27(18%) patients. Possible reduction in therapy was prompted in 27(18%) patients, mostly mild disease: LAB3, LABA/ICS16, and ICS8.

Discussion:
Computer-guided consultation is feasible and results in a number of recommendations and interventions that aid implementation of guideline based management. The data suggests that COPD care is not ideal; such software systems would allow for earlier optimisation of care with consequent benefit for patients and over all health outcomes.