

# An audit of appropriateness of hospital admissions with COPD exacerbation and compliance with NICE guidelines in an Irish General Hospital.

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## INTRODUCTION

Primary objective was to assess appropriateness of our hospital admissions of COPD exacerbations as per NICE guidelines. Secondary objectives; spirometry rates for diagnosis of COPD, smoking cessation advice, appropriate use of inhaled steroids and referral for pulmonary rehabilitation

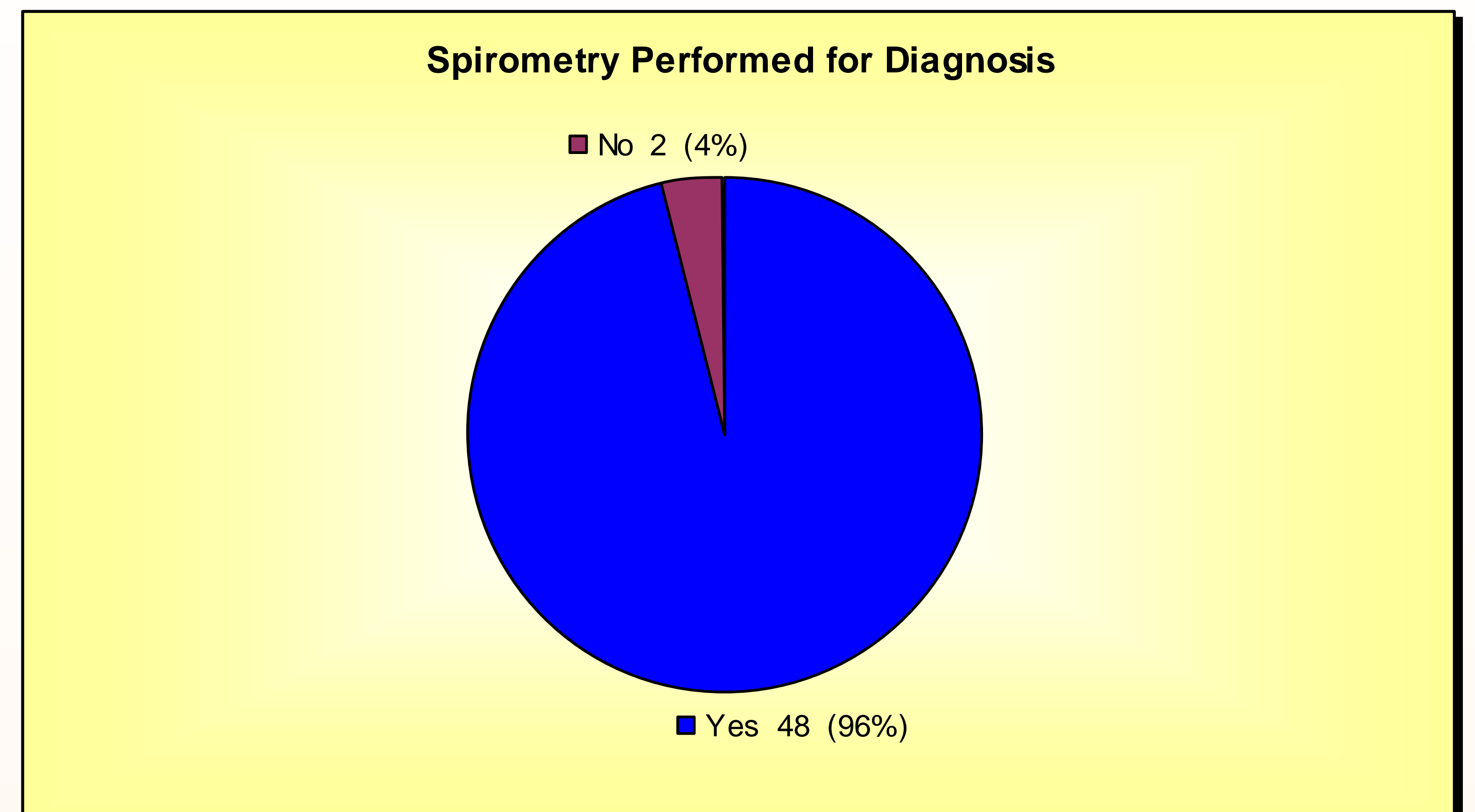
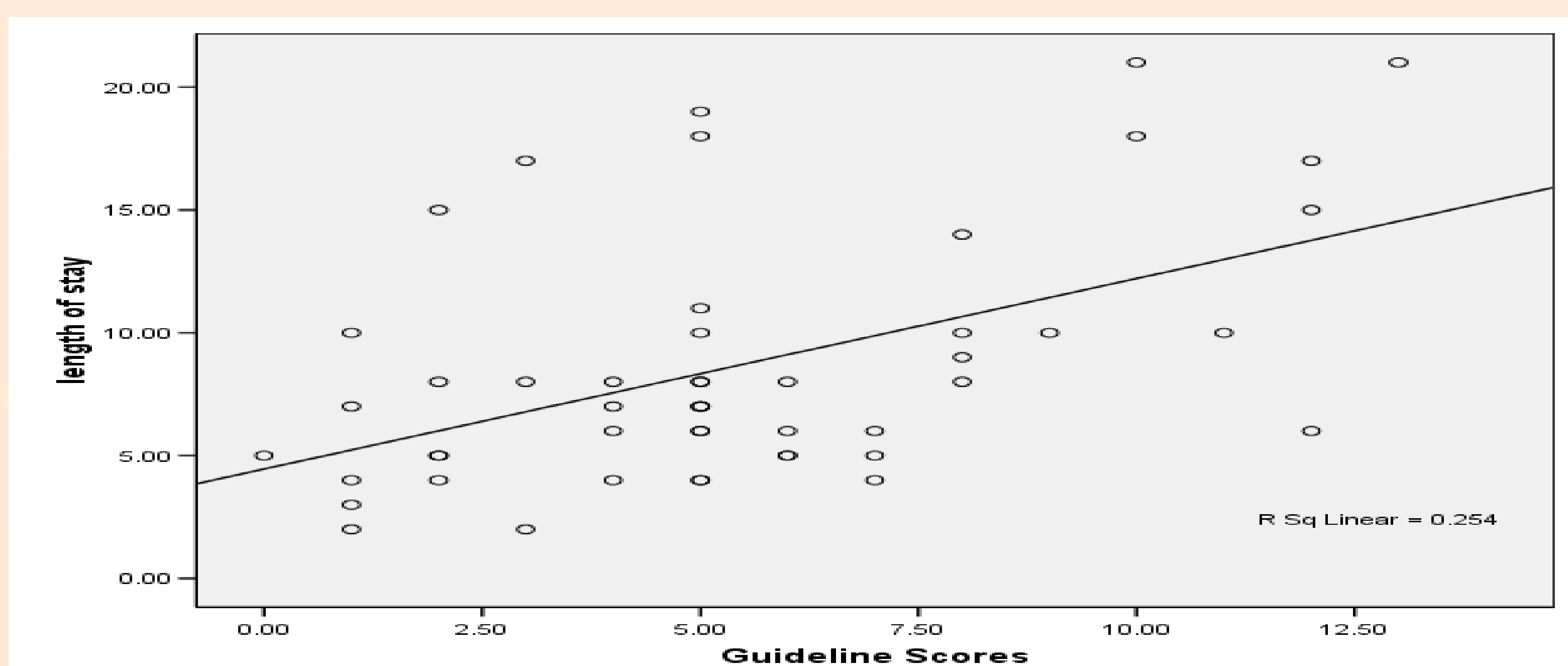
## METHODS

All COPD related admissions from March to May 2007 were prospectively reviewed. A total of 16 variables as per NICE guidelines were considered with one point for each variable. A score of zero was considered inappropriate admission while  $\geq 1$  was appropriate.

## RESULTS

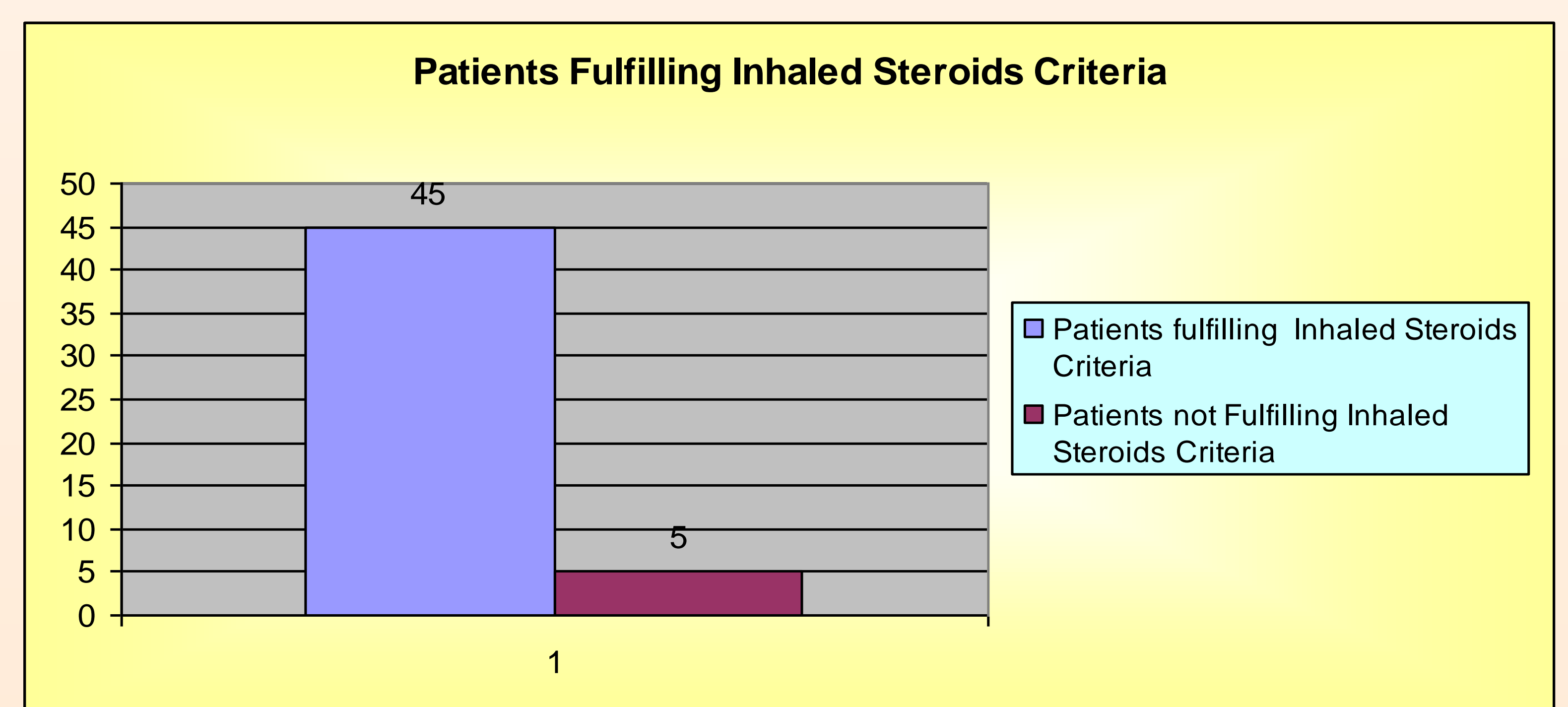
50 patients were included. Mean age was 74(54-91), Male 26(52%), 49 patients(98%) were admitted as per guidelines, only 1(2%) patient met no criteria. Poor level of activity was commonest variable present in 34(68%), followed by significant co morbidities 28(56%), inability to cope at home 24(48%). Least common variables included impaired level of consciousness 8(16%), cyanosis 6(12%) and acute confusion 4(8%). 48(96%) patients had spirometry performed for diagnosis. 19 out of 20 smokers(98%) were offered cessation advice. 45(90%) were appropriately on inhaled steroids. 24(48%) patients met criteria for Pulmonary Rehab and 12(50% of eligible) had pulmonary rehab. 48(98%) of patients received antibiotics. Mean length of stay was 8.6 days and there was linear relationship between length of stay and guideline score.

Length of Stay and NICE Guidelines Score



Commonest NICE Guideline Variables among COPD Patients

Poor Level of activity	34 (68%)
Significant co morbidities	28 (56%)
Not able to cope:	24 (48%)
Poor General Condition	23 (46%)
Sat <90%:	23 (46%)
Changes in chest radiograph	20 (40%)
Already receiving LTOT	19 (38%)
Arterial PaO <sub>2</sub> <7 kPa	19 (38%)



## CONCLUSION

There was excellent compliance with NICE Guidelines for COPD admissions and appropriateness for use of inhaled Steroids. Majority of patients had psychosocial factors leading to admission. Antibiotics were used in majority of patients. Pulmonary rehabilitation rates could be improved.

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