



## INTRODUCTION

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In the management of chronic obstructive pulmonary disease (COPD), achieving sustained bronchodilation through the regular use of long-acting bronchodilators is currently the best treatment option for symptomatic patients. Delivery of these drugs *via* inhalation therefore needs to be adequate and reliable to maximise the benefits of such treatment. However, current treatment guidelines contain little advice on the key elements of inhalation therapy; namely, delivery devices and their performance in COPD, approaching inhaler selection, methods for improving compliance and the impact of patient preference on drug delivery and treatment outcomes.

To explore this topic in more detail, a Round Table meeting, sponsored by Boehringer Ingelheim GmbH, was held in Zürich, Switzerland, on 3–4 June 2005. The papers in this Review arise from the proceedings of that meeting. Our purpose was to consider the subject of inhaler use and selection in COPD, and how compliance and treatment outcomes might be improved by taking patient preference

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into account. Our discussion was broken down into the following categories: patient needs and medication styles [1]; communication between patient and doctor [2]; adherence to therapy [3]; advantages and disadvantages of the main types of inhaler devices and how they affect technique [4]; assessment of device preference and satisfaction [5]; and the role of the caregiver in choosing the inhaler device [6]. A summary of the points from each paper is provided below.

### REFERENCES

- 1 Osman LM, Hyland ME. Patient needs and medication styles in COPD. *Eur Respir Rev* 2005; 14: 89–92.
- 2 Booker R. Effective communication with the patient. *Eur Respir Rev* 2005; 14: 93–96.
- 3 Rand CS. Patient adherence with COPD therapy. *Eur Respir Rev* 2005; 14: 97–101.
- 4 Newman SP. Inhaler treatment options in COPD. *Eur Respir Rev* 2005; 14: 102–108.
- 5 Anderson P. Patient preference for and satisfaction with inhaler devices. *Eur Respir Rev* 2005; 14: 109–116.
- 6 Chapman KR, Voshaar TH, Virchow JC. Inhaler choice in primary practice. *Eur Respir Rev* 2005; 14: 117–122.

## SUMMARIES FROM THE REVIEW PAPERS

### IMPROVING INHALER USE IN COPD AND THE ROLE OF PATIENT PREFERENCE

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- The pathophysiology of chronic obstructive pulmonary disease and asthma differ, and require different treatment approaches.
- Maintenance of sustained bronchodilation has been shown to improve several key clinical and physiological features of disease.
- The management of chronic obstructive pulmonary disease presents challenges relating to the age and expectations of patients, and their readiness to use and ability to handle inhaled drugs.
- Ensuring efficient delivery of drugs in chronic obstructive pulmonary disease patients is vital to treatment success but has received little attention.
- The three key factors in ensuring effective inhalation therapy are: the characteristics of the inhalation device; the patient's knowledge, attitudes and preference; and the physician's familiarity with inhalers and their skill in understanding the patient's needs and preferences.

Together, these factors influence satisfaction with therapy, which may affect long-term adherence and clinical outcomes.

### PATIENT NEEDS AND MEDICATION STYLES IN COPD

#### L.M. Osman and M.E. Hyland

- The need of chronic obstructive pulmonary disease patients for independence, control of their condition and maintenance of social functioning may conflict with their need to control their symptoms. Occasionally, some patients will trade-off symptom control in order to satisfy these psychological needs.
- Patients with chronic obstructive pulmonary disease react to their disease in different ways and adopt a variety of self-care styles in how they manage it. Recognising these personal styles will assist in effective management.
- The typical health path for a chronic obstructive pulmonary disease patient is a long-term deterioration with little or no chance of returning to "normality". This often makes