

HOW TO INHALE CORRECTLY



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DEAR PATIENT,

You suffer from a chronic lung disease – asthma or COPD (chronic obstructive pulmonary disease) and, therefore, you inhale medication. How effective it is depends to a large extent on how well you manage your inhaler. This leaflet contains information and tips on how to use inhalers containing your respiratory medicines.

▶ THIS IS HOW BREATHING WORKS

In order to really understand how your medicines work, it is important to be familiar with “normal” breathing. The lung is shaped like an upside down tree with the windpipe as the trunk. From there air passes through two main branches and several small branches – the bronchi – to the “leaves”, the pulmonary alveoli. The oxygen then enters the blood. That’s why it is so important for respiratory air to reach the alveoli unimpeded. In the case of asthma and COPD the airways – the bronchi – are constricted intermittently (asthma) or permanently (COPD) because of inflammation. The respiratory air can no longer be inhaled and exhaled in an unobstructed manner.

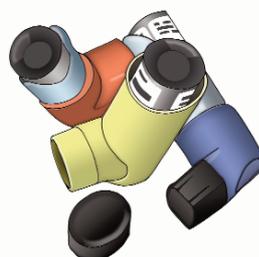
▶ INHALATIONAL MEDICINES

To treat asthma and COPD, medicines that dilate the airways (bronchodilators) and anti-inflammatory medicines (cortisone preparations) are inhaled. As inhalational medicines normally have the greatest effect where they are needed – in the airways – they are more easily tolerated than the equivalent tablets with the same active ingredient. This means that, they can be administered at a lower dose and potential side-effects are also reduced. Details about the individual medicines are given in the Patient Guidelines (see box overleaf).

▶ INHALATION DEVICES

There are many different types of inhaler which may vary considerably when it comes to how to use them and the related advantages and disadvantages. The most frequent types of inhalers are MDI (metered dose inhalers) and dry powder inhalers.

Examples of MDI:



■ In the case of an MDI many tiny droplets of the medicine are released in a puff of spray. You trigger the puff manually by pressing on the canister, in the case of breath-activated inhalers also by inhaling. The inhalation must be coordinated exactly with the puff. You have to spray and inhale at the same time.

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Examples of dry powder inhalers:



■ In the case of dry powder inhalers the medicine is distributed in tiny powder particles in the airways. The hand movement and inhalation don’t have to be coordinated. Because you have to breathe in far more deeply when using a dry powder inhaler than an MDI, it is only suitable when you can breathe in sufficiently strongly.

PATIENT INFORMATION

▶ Asthma and COPD

▶ INHALING CORRECTLY

Even if it looks easy, you still have to learn how to inhale. Let's take the example of an MDI:



- Remove the protective cap.
- Shake inhaler vigorously.
- Breathe out completely.
- Position lips and teeth tightly around the mouthpiece.
- When inhaling, bend head slightly backwards.
- Breathe in evenly and deeply.
- Inhale at the same time as you press the canister and release puff.
- Breathe in deeply from the inhaler.
- Hold your breath for between five and ten seconds to allow the medicine to reach your lungs.
- Breathe out slowly, if possible through your nose.
- Replace the protective cap.



▶ WHAT YOU CAN DO

To ensure that the medicine can reach the smaller bronchi and have an effect there, it is extremely important that you learn the "right way to inhale" the medicine in your inhaler. For instance, you could attend a patient training course or seek information in the pharmacy which supplies your inhaler. The package insert also contains additional details. Your doctor is particularly well placed to support you. Ask him to explain:

- why this inhaler is the right one for you
- what protective caps or covers have to be removed before using your inhaler
- whether you have to shake the inhaler before using it
- whether and, if so, how you should clean your inhaler
- when and how you should refill your inhaler
- how you can tell when your inhaler needs to be replaced
- what position you should adopt when inhaling
- how to breathe when using your inhaler.

Show your doctor at regular intervals how you use your inhaler – just to be on the safe side.

▶ MORE INFORMATION

This Patient Information is based on the latest scientific findings and sums up the most important points from the Patient Guidelines "Asthma" and "COPD".

Other useful links

PatientenLeitlinien "Asthma" und "COPD": (Patient Guidelines "Asthma" and "COPD"):
www.patienten-information.de/patientenleitlinien

Self-help organisations and co-operation partners involved in the Patient Guidelines:
www.patienten-information.de/patientenbeteiligung/selbsthilfe, www.azq.de/pf

Self-help contact

You can find out from NAKOS (national contact and information office for the encouragement and support of self-help groups) where there is a self-help group in your area: www.nakos.de, Tel.: 030 3101 8960

Patient Guidelines

Patient Guidelines translate the treatment recommendations in medical guidelines into everyday language that can be understood by ordinary people. They provide important background information on the causes, examination methods and treatment of a disease. The BÄK (German Medical Association), the KBV (National Associations of Statutory Health Insurance Physicians) and the AWMF (Association of Scientific Medical Societies) working group co-ordinate the programme for the development of medical guidelines ("National Disease Management Guidelines") and the respective patient versions.

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