

Pharmacotherapy Management of COPD Exacerbation (PCE) – Systemic Corticosteroid

CLINICAL RATIONALE

- The NCQA advises: “Approximately 15 million adults in the United States have COPD, an irreversible disease that limits airflow to the lungs. COPD exacerbations or ‘flare-ups’ make up a significant portion of the costs associated with the disease. However, symptoms can be controlled with appropriate medication. Appropriate prescribing of medication following exacerbation can prevent future flare-ups and drastically reduce the costs of COPD.”¹
- The Global Initiative for Chronic Obstructive Lung Disease has stated that treatment of COPD exacerbation is focused on minimizing current negative impact and preventing future events. For initial bronchodilator treatment of an acute exacerbation, short-acting inhaled beta2-agonists, with or without short-acting anticholinergics, are recommended. Recommendations also include initiation of long-acting bronchodilator maintenance therapy as soon as possible before discharge; and prescription of systemic corticosteroids (for no more than 5-7 days), which can improve lung function and oxygenation – and can shorten recovery time and length of hospital stay.²
- In 2003, the New England Journal of Medicine published results of a study of the effectiveness of prednisone in reducing the risk of relapse after outpatient exacerbations of COPD. This study found that patients who were given a systemic corticosteroid had a lower relapse rate after 30 days and a longer time to relapse. Patients also had a greater increase in forced expiratory volume after 10 days.³

*HEDIS PCE: Healthcare Effectiveness Data and Information Set – Pharmacotherapy Management of COPD Exacerbation (PCE).

¹ The National Committee for Quality Assurance (NCQA). Pharmacotherapy management of COPD exacerbation (PCE). <https://www.ncqa.org/hedis/measures/pharmacotherapy-management-of-copd-exacerbation/>.

² The global initiative for chronic obstructive lung disease pocket guide to copd diagnosis, management and prevention. A guide for health care professionals 2018 Report. <https://goldcopd.org/wp-content/uploads/2018/02/WMS-GOLD-2018-Feb-Final-to-print-v2.pdf>.

³ Aaron, S.D., Vandemheen, K.L., Hebert, P. et al. Outpatient oral prednisone after emergency treatment of chronic obstructive pulmonary disease. *N Engl J Med*. 2003;348:2618–2625.



MEASURE AT A GLANCE



Applicable specialties

Family/General Practice



Measure steward

National Committee for Quality Assurance (NCQA)



Measure identifiers

HEDIS PCE*



Measure description

Patient(s) 40 years of age and older with COPD exacerbation that received a systemic corticosteroid within 14 days of the hospital or ED discharge



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