COPD AND ITS TREATMENT QUESTIONNAIRE

Name:    Age:
No. of years of practice: Qualification:
Specialization: Practice setting: Hospital / Clinic
Country: City:
Contact number: Email:

DEMOGRAPHICS

1. How many patients do you encounter with COPD in your daily practice? (Select one)
   - Less than 5
   - 5-10
   - 10-20
   - More than 20

2. The highest number of your COPD patients belong to which age band? (Select one)
   - Less than 40 years
   - 40 – 60 years
   - Above 60 years

3. What percentage of your COPD patients are female? __________%

4. What percentage of your patients with COPD never smoked? (Select one)
   - zero
   - 1 – 10
   - 10 – 30
   - 30 – 50
   - >50

DIAGNOSIS & MONITORING

5. How do you routinely diagnose COPD in your practice? (Select one)
   - Only clinical
   - Clinical + Spirometry
   - Clinical + Peak flow meter

6. How often do you suggest a follow up for your COPD patients? (Select one)
   - Every month
   - Every 3 months
   - Every 6 months

MANAGEMENT

7. Which of the following do you prioritize while selecting a treatment for patients with COPD? (Select one)
   - Exacerbation history
   - Lung function
   - Symptoms

8. As per GOLD guideline, which is your preferred therapeutic choice for each group of COPD patient?
   (Choices: LAMA, LABA/LAMA, LAMA+ICS/LABA, ICS/LABA, LABA, SABA, SAMA, SABA/SAMA)

   | GROUP C | GROUP D |
   |------------------|------------------|
   | % of COPD patient visits you: ____________________ | % of COPD patient visits you: ____________________ |
   | Preferred choice: ____________________ | Preferred choice: ____________________ |
   | pMDI/DPI/Nebulization: ____________________ | pMDI/DPI/Nebulization: ____________________ |

   | GROUP A | GROUP B |
   |------------------|------------------|
   | % of COPD patient visits you: ____________________ | % of COPD patient visits you: ____________________ |
   | Preferred choice: ____________________ | Preferred choice: ____________________ |
   | pMDI/DPI/Nebulization: ____________________ | pMDI/DPI/Nebulization: ____________________ |
9. Which of the following non-pharmacological treatments do you routinely offer to your patients with COPD? (Can tick multiple)
   - Smoking cessation advice
   - Pulmonary rehabilitation/physical exercise schedule
   - Vaccination (influenza, pneumococcal)
   - Dietetic advice
   - Advice for comorbidities (cardiac diseases, diabetes, depression, anxiety, osteoporosis)

10. For every 10 patients with COPD that visit you, to how many do you prescribe inhalation therapy? (Select one)
    - None
    - 1-3
    - 4-6
    - 7-10
    - All

11. In your experience, for every 10 patients with COPD that visit you, how many patients are apprehensive to use inhalers? (Select one)
    - Zero
    - 1-3
    - 4-6
    - 7-10

12. Of the following devices, which one do you prefer to prescribe to maximum patients with COPD? (Select one)
    - pMDI
    - DPI
    - pMDI + spacer
    - Nebulizer

13. Do you generally prescribe spacer along with pMDI for COPD?
    - Yes
    - No

14. Do you prescribe home nebulization in COPD patients?
    - Yes
    - No

   If yes, in what percentage of patients? (Select one)
   - 5 to 10%
   - 10 to 25%
   - 25 to 50%
   - more than 50%

   If yes, what is your preferred drug for nebulization? (Select one)
   - SABA alone
   - SABA + SAMA
   - LABA alone
   - ICS alone

15. In your experience, for every 10 patients that visit you, how many show good adherence (>80%) to the prescribed inhaled treatment? (Select one)
    - None
    - 1-3
    - 4-6
    - 7-10

16. How often do you/your assistant/other healthcare professional evaluate the inhalation technique of your COPD patients? (Select one)
    - Every visit
    - Sometimes on suspecting wrong technique
    - Sometimes as a routine checkup
    - Never

17. Once the category of drug is finalized, what would you consider the most before prescribing? (Select one)
    - Cost of treatment per day
    - Frequency of daily dose (OD or BD)
    - Device type (pMDI or DPI)

18. In your opinion, what is the biggest reason of non-adherence to the COPD treatment? (Select two)
    - Device type
    - Poor technique
    - Cost of therapy
    - Apprehension for the inhalation therapy
    - Patient feels that the treatment is ineffective
    - Patient feels that he is perfectly fine and doesn’t need the treatment

**Signature:**

**Abbreviations:**
- COPD: Chronic Obstructive Pulmonary Disease
- GOLD: Global Initiative for Chronic Obstructive Lung Disease
- LAMA: Long Acting Muscarinic Receptor Antagonist
- LABA: Long Acting Beta2 receptor Antagonist
- ICS: Inhaled Cortico Steroid
- SABA: Short Acting Beta2 receptor Antagonist
- SAMA: Long Acting Muscarinic Receptor Antagonist
- pMDI: Pressurized Metered Dose Inhaler
- DPI: Dry Powder Inhaler
- OD: Once Daily
- BD: Twice Daily