COPD patients rarely receive pulmonary rehabilitation despite its health benefits

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Micrograph showing emphysema (left – large empty spaces) and lung tissue with relative preservation of the alveoli (right). Credit: Wikipedia

Only a tiny fraction of patients hospitalized for COPD, or chronic obstructive pulmonary disease, participate in a pulmonary rehabilitation program following hospitalization, even though such programs are recommended and Medicare covers their cost, according to new research published online in the Annals of the American Thoracic Society.

In "Participation in Pulmonary Rehabilitation Following Hospitalization for COPD among Medicare Beneficiaries," Kerry A. Spitzer, Ph.D., MPA, and co-authors report that in 2012 only 1.9 percent of COPD patients nationally started a pulmonary rehabilitation within six months of being hospitalized for a COPD exacerbation. This despite the fact that two years earlier Medicare's policy changed to provide coverage for pulmonary rehabilitation services, effectively offering pulmonary rehabilitation to millions of U.S. patients for the first time.

COPD is a chronic disease and the fourth leading cause of death in the U.S. Pulmonary rehabilitation provides exercise training, self-management advice, nutrition counseling and emotional support. Despite its proven benefits, an ATS-commissioned survey by Wakefield Research found that 62 percent of people diagnosed with COPD have never heard of pulmonary rehabilitation.

The patient-tailored intervention has been shown to improve physical and psychological well-being and quality of life. Other studies have shown that pulmonary rehabilitation reduces COPD exacerbations that often lead to hospitalization. Clinical guidelines recommend that patients begin pulmonary rehabilitation within three weeks following discharge from the hospital.

According to study senior author Peter Lindenauer, MD, MSc, a hospitalist at Baystate Medical Center and director of the Institute for Healthcare Delivery and Population Science at the University of Massachusetts Medical School, there has been growing recognition of the benefits of pulmonary rehabilitation.

As hospitals and health systems, like ours, increase efforts to keep patients with COPD healthy and out of the hospital, we have prioritized enrolling patients into our rehabilitation program prior to hospital discharge," Dr. Lindeauer said. "As a result, we are seeing improvements in readmission rates among patients with COPD."

After reviewing the records of 223,832 patients hospitalized for COPD in 2012, the researchers found:

- 4,225 (1.9 percent) received pulmonary rehabilitation within six months of being discharged from the hospital.
- 6,111 (2.7 percent) received pulmonary rehabilitation within one year of being discharged from the hospital.
- Whites, males, younger patients and those on home oxygen were more likely to receive
pulmonary rehabilitation.
- Smokers and those living farther than 10 miles away from a pulmonary rehabilitation program, belonging to lower socioeconomic groups and coping with additional chronic diseases and prior hospitalizations were less likely to receive pulmonary rehabilitation.
- Among those who started pulmonary rehabilitation, more than half completed at least 16 sessions. Medicare will typically pay for up to 36 sessions.

Study limitations include the fact that researchers could not determine whether the low rates of pulmonary rehabilitation utilization were due to lack of physician referrals, patients choosing not to attend or a combination of the two factors. Dr. Spitzer, the lead study author and senior clinical research coordinator at Baystate, believes more research is needed to understand why patients are not receiving pulmonary rehabilitation.

"Unfortunately, many patients face multiple barriers to participating, such as family responsibilities or transportation, and participation rates are especially low among vulnerable populations," she said. "We have a lot to learn about how hospitals can help address these challenges."


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