



**NATIONAL REGISTER**  
OF HEALTH SERVICE PSYCHOLOGISTS

# Respiratory Disease

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# Respiratory

- **Types of COPD: Emphysema, Chronic Bronchitis & Chronic Obstructive Asthma**
- **Primary Presenting Medical Symptoms**
  - **Dysnea (Breathlessness)**
  - **Cough**
  - **+ Sputum Production**
  - **Wheezing and Other Abnormal Breath Sounds**

# Tools for Assessment and Tracking

- **EMR (Electronic Medical Record) Based**
  - Vital Signs – BP, RR, BMI, PO2
  - PQRS (Physician Quality Reporting System) CMS
    - Depression
    - Smoking Status

# Initial Medical Assessment – Pulmonary Function Tests

- **Spirometry**
  - **FEV<sub>1</sub>/FVC (Forced Expiratory Volume in 1 Second/Forced Vital Capacity)**
  - **FEV<sub>6</sub>**
  - **Peak Expiratory Flow**
  - **Pulse Oximetry**
  - **Lung Volume Measurement**
  - **ABGs (Arterial Blood Gases)**

# Medical Management of Stable COPD

- **Medications**
  - **Inhaled Bronchodilators** – Beta Agonists & Anticholinergics
  - **Inhaled Glucocorticoids**
- **Monitor**
  - **Dyspnea**
  - **Activity Tolerance**
  - **Amount of “As-Needed” Medication Use**
  - **Lung Function**
- **Other Measures** – Pulmonary Rehabilitation and Nutritional Support

# Behavioral Adverse Effects of Medications

- **Short-Acting Beta Agonists** -> Anxiety, Tremor, Dizziness, Palpitations & Tachycardia
- **Inhaled Anticholinergics** -> Anxiety, Nausea, Dizziness
- **Chronic Use of Longer-Acting Corticosteroids** -> Reversible Cognitive Decline in the Elderly, Increased Risk of Osteoporosis, Increased Risk of Fracture During Exercise

# Common Behavioral Symptoms Driven, Caused, or Exacerbated by COPD

- **Weight Gain**
- **Skeletal Muscle Weakness**
- **Social Withdrawal**
- **Activity Limitation**
- **“Light Headedness” while Coughing**
- **Anxiety and Depression**



# Behavioral Treatment Goals— Guided Self-Help

- Improve adherence to **medical treatment plan**
- **Support program** leading to **increased exercise** and **activity tolerance**
- Assist patient as needed in **managing anxiety** complicated by COPD
- Assist patient as needed in **managing depressed mood** complicated by COPD
- Assist patient in identifying and **eliminating exacerbating causes** such as **smoking**



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