

## Considering Home-Based Monitoring for COPD

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## The Pros and Cons of Telemonitoring COPD

Although frequently used for diabetes and hypertension (conditions that need to be closely and consistently tracked), medical experts have recently introduced telemonitoring techniques to manage other chronic health conditions like chronic obstructive pulmonary disease (COPD). The benefits are clear: a household that is ready to monitor an illness will result in easier communication, frequent reporting, and empowerment for patients.

Learn the steps that are involved, the possible advantages, and what studies report about telemonitoring and COPD.

## How Telemonitoring Is Used for COPD

Telemonitoring is a proactive step in managing a chronic illness, and a real time saver! By relaying important information frequently and remotely to your medical team, your treatment can be managed and adjusted without having to visit the doctor for tests. COPD results in high levels of disability, and as the disease progresses more focused and constant care will be needed.

In the case of COPD, telemonitoring techniques may include:

- Daily questionnaires about symptoms and drug use
- · An instrument to measure oxygen saturation
- A biomedical sensor to record breathing, monitor heart rate and record tracheal sounds

Telemonitoring not only cuts travel time, it allows you to take your health into your own hands and begin to change your behavior in beneficial ways. In fact, patient empowerment may be the greatest advantages of telemonitoring; by learning to identify exacerbations and manage challenges yourself, you can reduce your number of visits to the hospital and keep yourself more comfortable in your home.

## **Research Findings and Implications for COPD Patients**

Though research on the results of telemonitoring for COPD has increased in recent years, findings have been mixed. Some studies report an improved quality of life for patients, while others warn that this approach is ineffectual at best. There are concerns that telemonitoring could lead to overtreatment, which may strain medical resources without benefiting patients.

Telemonitoring undoubtedly promises closer monitoring, but does not necessarily mean your COPD will be better managed. The use of home devices for recording and reporting might not increase life expectancy for patients; most studies agree education can make a great difference in the quality of self-care.

If you'd like to take a more active role in your own care, discuss the possibility of using telemonitoring techniques

with your doctor. It's important to learn about your disease, your symptoms and what you can do about them rather than relying on a medical team. COPD will not disappear, but by changing the way you approach your disease, you can make life more comfortable for yourself.