

# Chronic obstructive pulmonary disease (acute exacerbation): antimicrobial prescribing



Consultation on draft guideline – deadline for comments 17.00 on 06/08/2018 email: [infections@nice.org.uk](mailto:infections@nice.org.uk)

	<p>Please read the checklist for submitting comments at the end of this form. We cannot accept forms that are not filled in correctly.</p> <p>We would like to hear your views on the draft recommendations</p> <p>We would like to hear your views on these questions:</p> <ol style="list-style-type: none"><li>1. Which areas will have the biggest impact on practice and be challenging to implement? Please say for whom and why.</li><li>2. Would implementation of any of the draft recommendations have significant cost implications?</li><li>3. What would help users overcome any challenges? (For example, existing practical resources or national initiatives, or examples of good practice.)</li><li>4. For the <b>guideline</b>:<ul style="list-style-type: none"><li>○ Are there any recommendations that will be a significant change to practice or will be difficult to implement? If so, please give reasons why.</li><li>○ What are the key issues or learning points for professional groups?</li></ul></li></ol> <p>See section 3.9 of <a href="#">Developing NICE guidance: how to get involved</a> for suggestions of general points to think about when commenting.</p>
<b>Organisation name – Stakeholder or respondent</b> (if you are responding as an individual rather than a registered stakeholder please leave blank):	The Royal Pharmaceutical Society

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<b>Disclosure</b> Please disclose any past or current, direct or indirect links to, or funding from, the tobacco industry.	None			
<b>Name of commentator person completing form:</b>	Andrew Cooke			
<b>Type</b>	[office use only]			
<b>Comment number</b>	<b>Document</b> (guideline, evidence review or the visual summary)	<b>Page number</b> Or <b>'general'</b> for comments on the whole document	<b>Line number</b> Or <b>'general'</b> for comments on the whole document	<b>Comments</b>  Insert each comment in a new row. Do not paste other tables into this table, because your comments could get lost – type directly into this table.
Example 1	Evidence review	16	45	We are concerned that this recommendation may imply that .....
Example 2	Evidence review	16	45	Question 1: This recommendation will be a challenging change in practice because .....
Example 3	Evidence review	16	45	Question 3: Our trust has had experience of implementing this approach and would be willing to submit its experiences to the NICE shared learning database. Contact.....
1	Draft	2	11	Whilst the visual summary mentions that patients may have a course of oral corticosteroids at home, this is not

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	Guideline			mentioned in the draft guideline.
2	Draft Guideline	2	11	The guideline should mention that patients may need a course of oral corticosteroids for an exacerbation, co-prescribed with the antibiotic (and refer to the appropriate NICE guideline on this)
3	Draft Guideline	3	9, 15	<p>These sections refer to <b>prescription</b> of antibiotics. Antibiotics can be and are also supplied using a patient group direction (PGD) by community pharmacists for COPD exacerbations. The guideline should refer to the important role that community pharmacists can play in supporting patients with COPD in helping recognise and manage exacerbations at an early stage, including supplying rescue packs (with antibiotics) when appropriate, using a PGD. A paper on COPD support service (can be found via the link below on the main CPF website) evidences the health economic value of this.</p> <p><a href="http://www.communitypharmacyfuture.org.uk">www.communitypharmacyfuture.org.uk</a></p> <p>Community pharmacies in Scotland have been providing rescue medication, including antibiotics using a PGD for several years.</p> <p><a href="http://www.communitypharmacy.scot.nhs.uk/nhs_boards/NHS_Forth_Valley/redesign/LNS/pharmacy_first.html">http://www.communitypharmacy.scot.nhs.uk/nhs_boards/NHS_Forth_Valley/redesign/LNS/pharmacy_first.html</a></p>
4	Visual Summary			<p>The summary paper only refers to <b>prescription</b> of antibiotics. Antibiotics can be and are also supplied using a patient group direction (PGD) by community pharmacists for COPD exacerbations. The visual summary should refer to the important role that community pharmacists can play in supporting patients with COPD in helping recognise and manage exacerbations at an early stage, including supplying rescue packs (with antibiotics) when appropriate, using a PGD.</p> <p>A paper on COPD support service (can be found via the link below on the main CPF website) evidences the health economic value of this.</p> <p><a href="http://www.communitypharmacyfuture.org.uk">www.communitypharmacyfuture.org.uk</a></p> <p>Community pharmacies in Scotland have been providing rescue medication, including antibiotics using a PGD for several years.</p> <p><a href="http://www.communitypharmacy.scot.nhs.uk/nhs_boards/NHS_Forth_Valley/redesign/LNS/pharmacy_first.html">http://www.communitypharmacy.scot.nhs.uk/nhs_boards/NHS_Forth_Valley/redesign/LNS/pharmacy_first.html</a></p>
5	Visual Summary			Section 1.5.1 of the evidence review mentions that: <i>Medicines adherence may be a problem for some people with medicines that require frequent dosing (for example, some antibiotics)</i> (NICE guideline on medicines adherence [2009]). The Visual Summary contains guidance for <b>When an antibiotic is given, advise:</b> This should also include the importance to complete the course of antibiotics as part of antimicrobial stewardship.
6				

Insert extra rows as needed

## Checklist for submitting comments

- Use this comment form and submit it as a Word document (not a PDF).

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- Complete the disclosure about links with, or funding from, the tobacco industry.
- Include page and line number (not section number) of the text each comment is about.
- Combine all comments from your organisation into 1 response. We cannot accept more than 1 response from each organisation.
- Do not paste other tables into this table – type directly into the table.
- Underline and highlight any confidential information or other material that you do not wish to be made public.
- Do not include medical information about yourself or another person from which you or the person could be identified.
- Spell out any abbreviations you use
- For copyright reasons, comment forms do not include attachments such as research articles, letters or leaflets (for copyright reasons). We return comments forms that have attachments without reading them. The stakeholder may resubmit the form without attachments, but it must be received by the deadline.

You can see any guidance that we have produced on topics related to this guideline by checking [NICE Pathways](#).

**Note:** We reserve the right to summarise and edit comments received during consultations, or not to publish them at all, if we consider the comments are too long, or publication would be unlawful or otherwise inappropriate.

Comments received during our consultations are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the comments we received, and are not endorsed by NICE, its officers or advisory Committees.