

GLMS CME RESPIRATORY

DONNY WONG

16TH JUNE 2025

73 YO FEMALE

- Moderate COPD (FEV1 1.13L, 57%) with eosinophils up to 1.4, known emphysema and ex smoker, CT showed mild bronchiectasis
- Comorbidities, SCC tongue, PPM for AV block, Prebyosephagus with PEG insertion, radiation associated carotid disease
- Meds Statin, Clopidogrel, Pantoprazole & others, Spiolto, Qvar,
- Presents with exacerbations of COPD what changes can be considered in terms of inhaler therapy?

CONTINUED EVENTS

- Trelegy switched by team had Atrovent continued.
- Then came back into hospital few more times with exacerbations
- Switched to Breztri and SAMA stopped
- Is there a rationale here?
- What else to do?

21 YO MALE

- Hx of cough for 4.5 months
- Other hx, had childhood asthma, has hay fever and never smoker
- FHx of atopy
- Has tried antibiotics and inhalers without benefit
- Eosinophils 0.3
- Chest x-ray normal 3/12 ago
- What to do next?

CARDIOVASCULAR OUTCOMES

- 42 year old male never smoker comes in with pneumonia gets AF with the sepsis
 - Otherwise fit & well and never smoker.
 - What cardiovascular outcomes are going to happen to him?
 - Would it matter if he had background cardiovascular disease?
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- How about other lung diseases?