

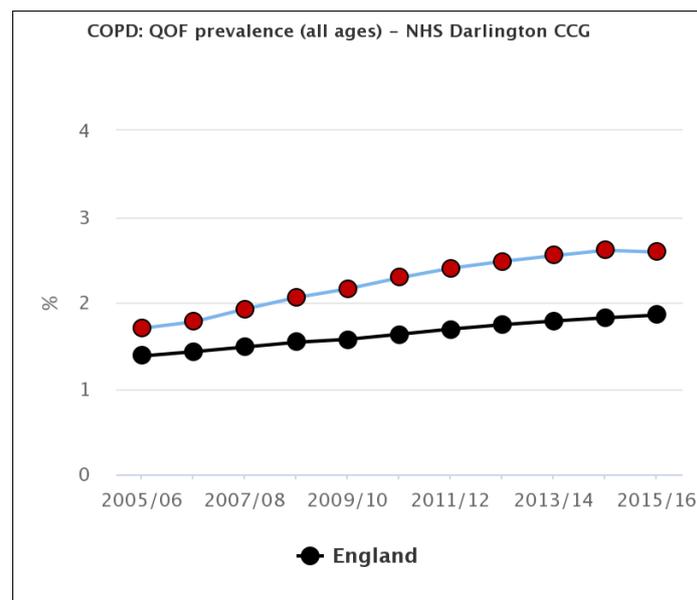
SECTION 7: CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

Chronic Obstructive Pulmonary Disease (COPD) refers to a group of conditions that cause narrowing of the small airways in the lungs resulting in difficulty breathing. It is irreversible and largely preventable – 80% of cases of COPD are associated with smoking – and is an important cause of disability and poor health in vulnerable and disadvantaged populations.

COPD is the UK's fifth biggest killer, claiming more lives than breast, bowel or prostate cancer. It is the second most common cause of emergency admission to hospital. The direct cost of providing care in the NHS for people with COPD is almost £500 million a year – more than half of which relates to hospital care.

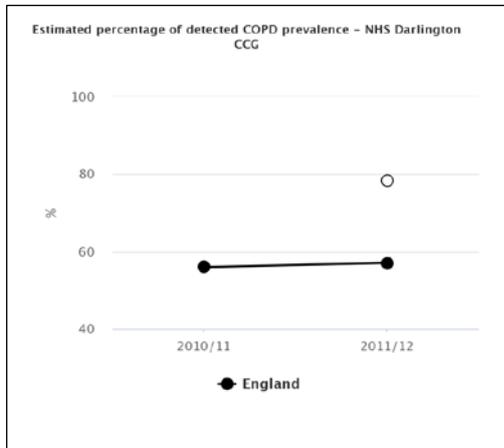
As well as being one of the leading causes of premature mortality, chronic respiratory diseases impose a significant burden of disability on patients and their carers. Patients with chronic respiratory disease have poor quality of life, poor mental health and emotional wellbeing, difficulty carrying out activities of daily living, and experience considerable discomfort. Respiratory disease places a significant burden on health services accounting for the largest proportion of primary care consultations and emergency medical admissions to hospital across England and Wales.

The percentage of patients with COPD, as recorded on GP practice disease registers in Darlington Clinical Commissioning Group was 2.6% in 2015/16, which was statistically worse than England at 1.9%.



(Source: [Public Health England Profiles](#))

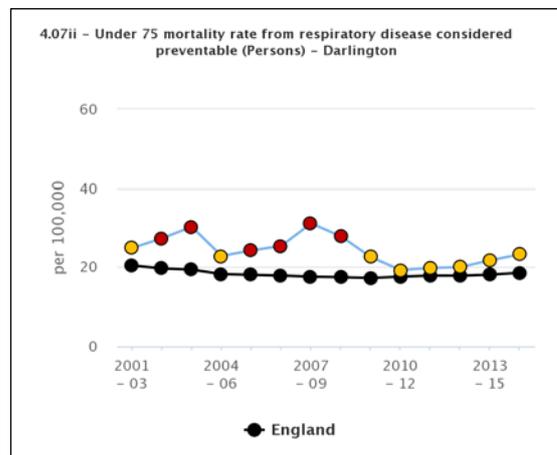
The detection of those with COPD in Darlington is better than England with the estimated percentage of detected COPD prevalence being 78.3% compared to England at 57.1%. Compared to other CCGs in the North East and Cumbria, Darlington CCG has the fourth highest percentage, the highest being 91.0% and the lowest at 52%.



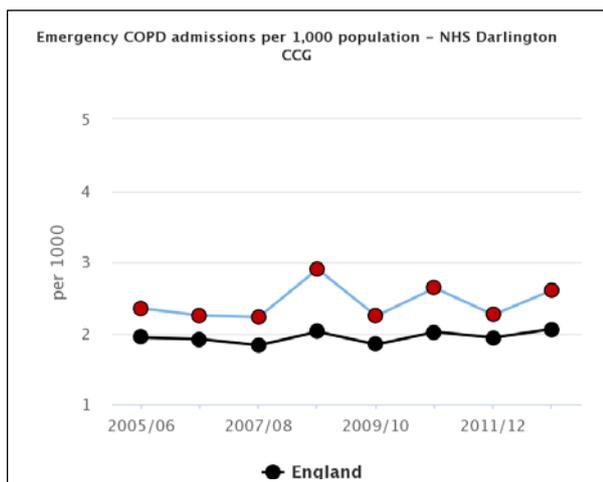
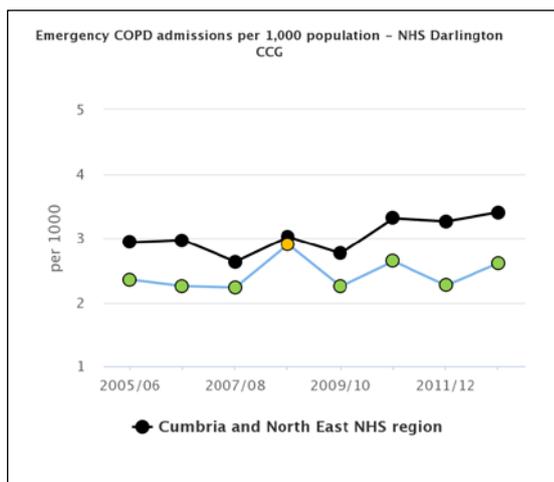
Area	Value	Lower CI	Upper CI
England	57.1	-	-
Cumbria and North East NHS region	-	-	-
NHS Durham Dales, Easin...	91.0	-	-
NHS North Durham CCG	83.5	-	-
NHS Northumberland CCG	80.8	-	-
NHS Darlington CCG	78.3	-	-
NHS South Tyneside CCG	75.7	-	-
NHS South Tees CCG	71.4	-	-
NHS Cumbria CCG	68.9	-	-
NHS Sunderland CCG	66.8	-	-
NHS Hartlepool And Stoc...	64.7	-	-
NHS Newcastle And Gates...	55.3*	-	-
NHS North Tyneside CCG	52.0	-	-

Source: QOF, ERPHO

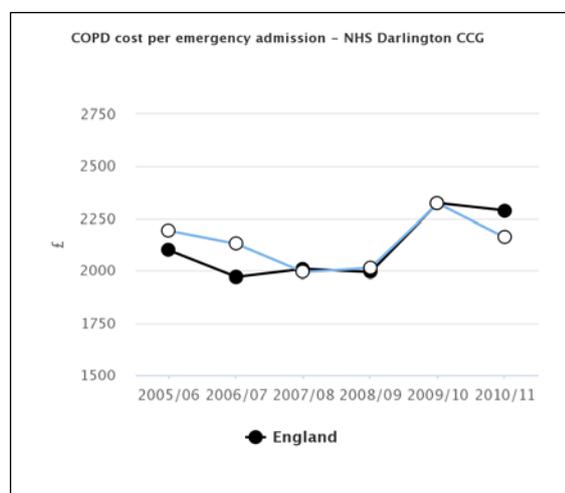
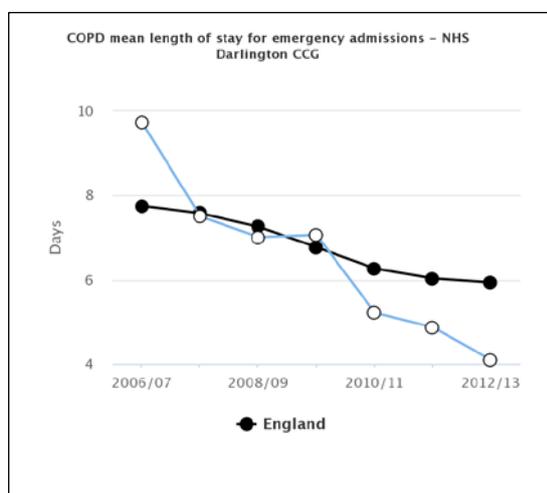
Under 75 mortality rate from respiratory disease considered preventable was 21.8 per 100,000 in Darlington in 2014-16 which is statistically similar to England at 18.1 per 100,000 and the North East regional rate of 25.4 per 100,000.



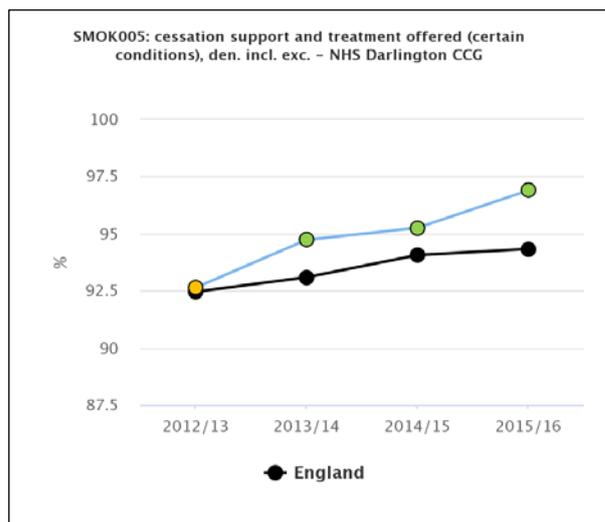
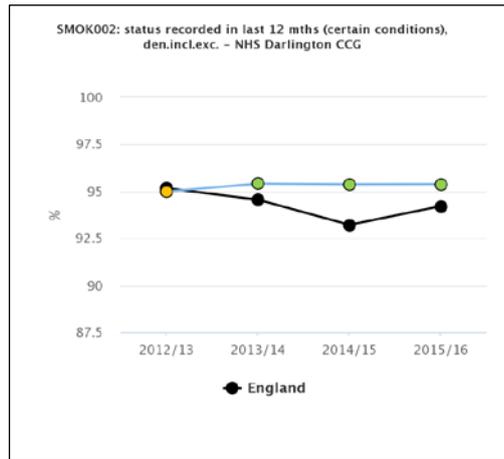
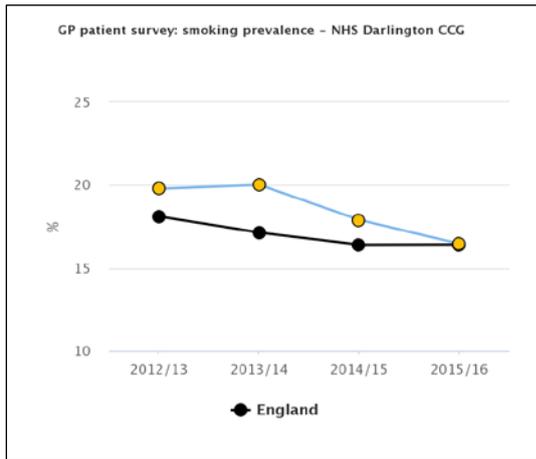
The COPD emergency admission rate for Darlington in 2012/13 was statistically better when compared to North East and Cumbria at 2.66 per 1,000 population, but statistically worse than England at 2.15 per 1,000 population. The rate for England and Darlington has increased since the baseline of 2005/06 however there has been a greater increase in Darlington compared to England over this period.



Of those admitted as emergencies in Darlington the mean length of stay has decreased significantly from 9.7 days in 2006/07 to 4.1 in 2012/13. This has been a greater and faster rate of reduction in comparison to England (7.8 in 2006/07 to 5.9 in 2012/13). However, the average cost per COPD emergency admission has decreased slightly over this period from £2,191 in 2005/06 to £2,159 in 2010/11. The average cost per COPD admission in England increased over this period from £2,097 in 2005/06 to £2,288 in 2010/11.



Smoking prevalence in adults in Darlington has been reducing over recent years. The GP survey indicates that those registered with a GP identifying as an occasional or regular smoker has decreased from 19.8% in 2012/13 to 16.5% in 2015/16. This reduction has been statistically similar to England. The recording of the smoking status in patients with specific chronic conditions including COPD has also improved in Darlington from 95% of all identified patients in 2012/13 to 95.4% in 2015/16. This is statistically better than England. This provides confidence that those at most risk of harm from smoking such as those with COPD who smoke are being detected in primary care with increasing rates of cessation support and treatment being offered.



Seasonal influenza for most, is a self-limiting and mild disease lasting 10-14 days. For those who are older or have chronic conditions, and particularly respiratory disease such as COPD, influenza can have much worse effects and outcomes which can result in GP appointments, hospital admissions and even death. It is essential that as many of those with chronic conditions including those with COPD receive a seasonal flu vaccine in the winter months to provide them with protection from the worst effects of an influenza infection. In Darlington, 81.0% of patients with COPD received the flu vaccination in 2015/16 which was statistically similar to 79.9% for England. However, this has decreased from a peak of 84.1% in 2013/14. This decrease followed the England trajectory over the same period.

COPD007: Influenza immunisation given 1 Aug - 31 Mar (den. incl. exc.) - NHS Darlington CCG

