PROJECT INFORMATION

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Comparing a Self-Management Program with and without Peer Support to Improve Quality of Life for Patients with COPD

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What was the research about?

Chronic obstructive pulmonary disease, or COPD, is a lung disease that makes it hard to breathe. Managing symptoms of COPD may improve patients' quality of life and reduce the need for urgent healthcare visits.

In this study, the research team wanted to learn if including peer support in a COPD self-management support program improved quality of life and reduced use of urgent health care. Peer support included outreach from a peer supporter and group meetings with other patients and family caregivers. Peer supporters had well-managed COPD and had received training to provide support. The team compared patients receiving self-management support with and without peer support.

What were the results?

After six months, patients with and without peer support didn't differ in quality of life.

During the program, patients with peer support had fewer COPD-related hospital and emergency room, or ER, visits than patients without peer support. This difference wasn't present at nine months—three months after peer support ended.

At nine months, patients with and without peer support didn't differ in the overall number of hospital and ER visits for any cause or rate of deaths.

Who was in the study?

The study included 292 patients with COPD and 50 family caregivers. Patients received care at clinics within a health system in Maryland. Of these patients, 71 percent were White, 26 percent were African American, and 3 percent were another race. The average age was 67, and 61 percent were women.

What did the research team do?

The research team assigned patients by chance to the self-management support program with or without peer support. In the program, a respiratory therapist met with patients and their family caregivers for one hour. The therapist described how to use medicines, inhalers, and oxygen and provided a written guide and contact information for follow-up questions.

In the peer support group, patients and caregivers received the same program. The research team also matched each patient with a peer supporter for one-on-one support. In addition, patients could attend up to eight group meetings over six months. At these meetings, patients talked about living with and managing COPD.

The research team interviewed patients in person at the start of the study and again by phone three, six and nine months later. The team collected data about hospital and ER visits from the state of Maryland.

Patients with COPD and their caregivers, healthcare providers, and patient advocates gave input throughout the study.

What were the limits of the study?

This study took place in one health system in one state. Results may differ in other states or health systems. Many patients didn't take part in the peer support activities, which may have affected study results.

Future research could look at ways to encourage more patients to take part in peer support activities.

How can people use the results?

Health systems can use these results when considering how to support patients with COPD.

To learn more about this project, visit www.pcori.org/Aboumatar357.