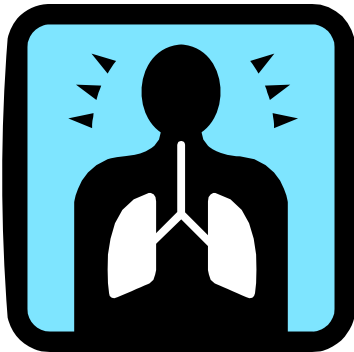


## Chronic Obstructive Pulmonary Disease



Chronic obstructive pulmonary disease (COPD) describes two related lung diseases: chronic bronchitis and emphysema. These diseases can occur separately, but many patients with COPD have both of these conditions. In people with emphysema, the walls between many of the air sacs in the lungs are destroyed, leading to a few large air sacs instead of many tiny ones. The lung looks like a sponge with many large

bubbles or holes in it, instead of a sponge with very small holes. The large air sacs have less surface area for the exchange of oxygen and carbon dioxide than healthy air sacs. Poor exchange of the oxygen and carbon dioxide leads to shortness of breath. In chronic bronchitis, the airways have become thickened and inflamed, and there is an increase in the number and size of mucus-producing cells. This results in excessive mucus production, which contributes to cough and difficulty getting air in and out of the lungs.

In the United States, approximately 14.2 million people have been diagnosed with COPD, 12.5 million people have chronic bronchitis, and 1.7 million people have emphysema. It is estimated that there may be an additional equal number of US citizens that have COPD but who have not been diagnosed. The number of people with COPD has increased by 41.5% since 1982.

Smoking is the primary risk factor for COPD. Approximately 80 to 90% of COPD deaths are caused by smoking. Other risk factors for COPD include air pollution, second-hand smoke, history of childhood respiratory infections and heredity. Occupational exposure to certain industrial pollutants also increases the odds of developing COPD.

Symptoms of COPD include chronic cough, increased sputum (mucus coughed from the airways), shortness of breath, and limitation of physical activity.

Doctors consider a diagnosis of COPD if you have the typical symptoms and a history of exposure to lung irritants, especially cigarette smoking. A medical history, physical exam, and breathing tests are the most important tests to determine if you have COPD. Based on the breathing tests, your doctor can determine if you have COPD and how severe it is. Doctors classify the severity of COPD as:

- **At risk (for developing COPD)** – Breathing test is normal. Mild signs that include a chronic cough and sputum production.

- **Mild COPD** – Breathing test shows mild airflow limitation. Signs may include a chronic cough and sputum production. At this stage, you may not be aware that airflow in your lungs is reduced.
- **Moderate COPD** – Breathing test shows a worsening airflow limitation. Usually the signs have increased. Shortness of breath usually develops when working hard, walking fast, or doing other brisk activities. At this stage, a person usually seeks medical attention.
- **Severe COPD** – Breathing test shows severe airflow limitation. A person is short of breath after just a little activity. In severe COPD, complications like respiratory failure or signs of heart failure may develop. At this stage, the quality of life is greatly impaired and the worsening symptoms may be life-threatening.

Quitting smoking is the single most important thing you can do to reduce your risk of developing COPD or slow the progress of the disease. Your doctor will recommend treatments that help relieve your symptoms and help you breathe easier. However, COPD cannot be cured. Treatments for COPD include:

- **Bronchodilators** – medications, often taken by an inhaler, that help open air passageways in the lungs
- **Corticosteroids** – medications taken by an inhaler to counteract inflammation in the air passages and lungs
- **Oxygen** – can help patients with COPD who have a hard time getting enough oxygen; often stored in a portable tank
- **Antibiotics** – can be helpful for fighting infections that make symptoms of COPD worse

### If you are living with COPD, a few points to remember include:

- If you are taking medicines, take them as ordered and make sure you refill them so you do not run out.
- See your doctor at least two times a year, even if you are feeling fine. Make sure you bring a list of medicines you are taking to your doctor visit.
- Ask your doctor or nurse about getting a flu shot and pneumonia vaccination.
- Keep your body strong by learning breathing exercises and walking and exercising regularly.
- Eat healthy foods. Ask your family to help you buy and fix healthy foods. Eat lots of fruits and vegetables, as well as foods high in protein like meat, fish, eggs, milk, and soy.

## Stop Smoking

According to the US Surgeon General, smoking cessation is the single most important step that smokers can take to enhance the length and quality of their lives. **It is not easy to quit smoking**, but it can be done. Ask your pharmacist or physician about smoking cessation programs in your area today!

### Benefits of Smoking Cessation

**In 20 minutes**, your heart rate drops

**In 12 hours**, the carbon monoxide level in your blood drops to normal

**In 2 weeks to 3 months**, your circulation and lung function improve

**In 1 to 9 months**, coughing and shortness of breath decrease

**In 1 year**, your risk of heart disease is half that of a smoker's

**In 5 years**, your stroke risk is decreased to that of a nonsmoker

**In 10 years**, your risk of dying from lung cancer is half that of those who continue to smoke

**In 15 years**, your risk of coronary

heart disease is that of a nonsmoker's  
*Adapted from The US Surgeon General's Report, 1988 and 1990.*



### How can I quit smoking?

There are many ways to stop smoking such as "cold turkey", step-by-step manuals, counseling, or medications. Optimal treatment varies from person to person. Consult your health care provider to help you determine the best way to quit.

### Smoking cessation medications

There are two types of medications that are used to aid in smoking cessation: nicotine replacement and non-nicotine therapies. Nicotine replacement therapies contain nicotine and allow patients to wean themselves off gradually without the harmful chemicals in cigarettes. Most nicotine replacement products are available without a prescription. Non-nicotine medications do not contain nicotine but work to "trick" your brain into thinking you are getting the nicotine you crave. Using one of these medications generally doubles a person's chances of quitting.

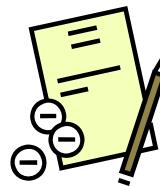
### Nicotine Replacement Therapies

- Nicotine patch (e.g., **Nicoderm®CQ®**, **Nicotrol®**, **Habitrol®**)
- Nicotine gum (**Nicorette®** and others)
- Nicotine lozenge (**Commit®**)
- Nicotine nasal spray (**Nicotrol® NS**)\*
- Nicotine inhaler (**Nicotrol® inhaler**)\*

### Non-Nicotine Therapies

- Bupropion (**Wellbutrin®**)\*
- Varenicline (**Chantix™**)\*

*\*Prescription required*



For more information on smoking cessation:

**American Cancer Society**  
1-800-ACS-2345

**American Heart Association**  
1-800-AHA-USA1

**American Lung Association**  
1-800-LUNG-USA

## It's Flu Season!



The influenza virus can cause serious illness, especially in those aged 65 years and older, children under 2 years of age, or those of any age that have medical conditions that put them at risk for complications. The best way to prevent the flu is **vaccination**. Those at high risk for complications from the flu should get the injectable form of the flu vaccine.

### Who should get a flu shot?

- ✓ All people who want to decrease the risk of becoming ill with influenza or of transmitting influenza to others
- ✓ Healthy people aged 50 years and older
- ✓ People in nursing homes or other long-term care facilities
- ✓ Adults and children with chronic heart or lung problems
- ✓ Adults and children with diabetes, kidney problems, blood disorders or decreased immune function
- ✓ Children and teens aged 6 months to 18 years who are on long-term aspirin treatment at risk for developing Reye syndrome after infection with the flu virus
- ✓ Women who will be pregnant during the flu season
- ✓ Children aged 6 to 59 months, and their household contacts and out-of-home caregivers
- ✓ Healthcare workers who may transmit the flu to their patients
- ✓ Household contacts of those at high risk



### Who should NOT get a flu shot?

- ✓ People with an allergy to eggs or other vaccine ingredients
- ✓ Those with a moderate to severe illness with fever should not be vaccinated until they feel better

### Who should get the nasal flu vaccine?

- ✓ Healthy children ages 2-4 years without prior history of wheezing
- ✓ Healthy, nonpregnant people aged 5 to 49 years

### Who should NOT get the nasal flu vaccine?

- ✓ Those at high risk, who qualify for the injectable vaccine
- ✓ People with an allergy to eggs or other vaccine ingredients
- ✓ Those with a history of Guillain Barre Syndrome

Adapted from: CDC. Prevention and control of influenza. Recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR 2007; 56:1-54.

## RECIPE CORNER

### Crunchy Pumpkin Pie

#### For the pie crust:

- 1 C quick cooking oats
- 1/4 C whole wheat flour
- 1/4 C ground almonds
- 2 Tbsp brown sugar
- 1/4 tsp salt
- 3 Tbsp vegetable oil
- 1 Tbsp water

#### For the pie filling:

- 1/4 C packed brown sugar
- 1/2 tsp ground cinnamon
- 1/4 tsp ground nutmeg
- 1/4 tsp salt
- 1 egg, beaten
- 4 tsp vanilla
- 1 C canned pumpkin
- 2/3 C evaporated skim milk



#### Each serving provides:

- Calories: 177
- Total fat: 8g
- Saturated fat: 1g
- Cholesterol: 24mg
- Sodium: 153mg

Preheat oven to 425 degrees F. Mix oats, flour, almonds, sugar and salt together in small mixing bowl. Blend oil and water together in measuring cup with fork or whisk until emulsified. Add oil mixture to dry ingredients and mix well. If needed, add small amount of water to hold mixture together. Press into a 9-inch pie pan and bake for 8—10 minutes until light brown. Turn oven down to 350 degrees F. Mix sugar, cinnamon, nutmeg and salt together in a bowl. Add eggs and vanilla and mix. Add pumpkin and milk and stir. Pour into prepared pie shell. Bake 45 minutes at 350 degrees F or until knife inserted near center comes out clean. **Yield: 9 servings.**

Adapted from: <http://www.nhlbi.nih.gov/health/public/heart/other/syah/index.com>

**Clinical Services Division**

333 Rouser Road  
Building #4 Suite 503  
Moon Township, PA  
15108

Member Address Label Here

**ABOUT RITE AID HEALTH SOLUTIONS**

We at Rite Aid Health Solutions are more than just a pharmacy benefits manager. We are committed to improving the health of our members. Our clinical team utilizes the most current information to develop programs tailored to your needs. Some of the services we are able to provide include:

- ✓ Quarterly wellness updates
- ✓ Education about your medical conditions
- ✓ Targeted medication profile reviews to ensure you are taking the right drug for the right length of time, based on current medical treatment guidelines

**?** Questions about your pharmacy benefits? Please contact us at

**1-866-828-5966**

for assistance

or

visit our website:

**[www.riteaidhealthsolutions.com](http://www.riteaidhealthsolutions.com)**



**November is National Diabetes Month**

From September 30th through December 29th, Rite Aid Pharmacies are partnering with the American Diabetes association to provide diabetes information to patients. Free Diabetes Guides containing information about nutrition, hidden dangers of the disease and a Diabetes Risk Test are available at Rite Aid Stores. Also available is a Diabetes Tips Booklet, entitled, "You're in Control!" featuring recipes, holiday tips, food conversion charts and money-saving coupons. Stop by your local Rite Aid Pharmacy or go to [www.riteaid.com](http://www.riteaid.com) for more information.