WELCOME TO
NEBULIZATION 101

• Why Use Inhaled Medications?
• Classes of Nebulized Medications
• Types of Nebulizers
• Selecting a Device For Your Patients
• Nebulization Safety
• Additional Resources
• Patient Materials

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Why Use Inhaled Medications?
The Inhalation Route Is Preferred for Most Pulmonary Medications¹

Delivery via the inhalation route allows medications to be delivered directly to the entire respiratory tract.

This allows medication molecules to be delivered directly to the site of action, allowing for:

Less medication per dose
Fast onset (potentially)
Fewer systemic effects (usually)
Inhaled Medication Therapy is Flexible

- Multiple medication classes available to accurately target pathophysiology
- Multiple device types to tailor therapy to individual needs/abilities/preferences
- Can be used with artificial airways (e.g., tracheostomies or endotracheal tubes)
Classes of Nebulized Medications
Beta$_2$ Agonists$^3$

- Stimulate beta$_2$ receptors in the airways, increasing intracellular cAMP and inhibiting airway smooth muscle contraction, thereby reducing bronchospasm.
- Potential for “off-target” stimulation resulting in adverse effects, such as:
  - Tachycardia
  - Musculoskeletal tremor
  - Headache
  - Mild hypokalemia
- Both short- and long-acting molecules are available.
Muscarinic Antagonists³

- Competitively bind muscarinic receptors (primarily M3-type) in airway cells, preventing activation by acetylcholine.
- Possible activation of muscarinic receptors outside the respiratory system with associated adverse effects:
  - Dry eyes
  - Dry mouth
  - Urinary retention
- Both short- and long-acting molecules are available.
Inhaled Corticosteroids

- Reduce capillary permeability and promote lysosomal membrane stabilization in airway cells, reducing inflammation.
- Variety of adverse effects, largely dependent on dose and duration.
  - Dysphonia
  - Oral candidiasis
  - Metabolic alterations
  - Pneumonia
  - Skeletal changes
  - Ocular changes
- Long-acting molecules only, with gradual onset of action.
Mucolytics\textsuperscript{6}

• Alter mucus structure to reduce viscosity and elasticity, promoting sputum clearance.
  - **Hypertonic saline**: Reduces viscosity through increased hydration of mucus
  - **Dornase alfa**: Reduces viscosity through depolymerization of neutrophil DNA

• Adverse effects are generally considered mild:
  - Laryngitis/pharyngitis
  - Voice changes

• Long-acting with daily or twice-daily dosing.
Antibiotics

• Least commonly used aerosolized medication class
  - Increasing evidence for prevention of multidrug resistant organisms (MDROs) in the inpatient setting
  - Also used in cystic fibrosis and non-CF bronchiectasis where colonization with MDROs is prevalent
• Dosing schedule varies widely
• Adverse effects can be similar to other antibiotics, but there is a lower risk of systemic effects:
  - Cough
  - Voice changes
  - Transient hearing loss
Types of Nebulizers
A Nebulizer Is Not an Inhaler!8

Nebulizers

- Require a power source (wall plug or battery)
- Considered durable medical equipment
- No special inhalation technique

Inhalers

- Powered by propellant or breath
- Disposable, covered under pharmacy benefit
- Requires coordination (pMDIs/SMIs) or substantial inspiratory flow rate (DPIs)

pMDI: Pressurized Metered Dose Inhaler
SMI: Soft Mist Inhaler
DPI: Dry Powder Inhaler
Pneumatic Nebulizer

- Also called jet or updraft nebulizers.
- Aerosol generated by air pressure.
  - Most commonly using an electric compressor.
  - Can also be driven by compressed gas source (e.g. an oxygen tank).
- Inexpensive.
- Disposable tubing and supplies.
Ultrasonic Nebulizer

- Aerosol generated by a piezoelectric crystal vibrating at 1-3 megahertz (MHz).
- Improved efficiency versus pneumatic nebulizers.
- More expensive.
- Incompatible with certain solutions.
Vibrating Mesh Nebulizer

- Aerosol generated by forcing solution through precision-machined mesh (also known as a “micropump”).

- Most efficient aerosol generation, most consistent particle size, most quiet devices.

- Most expensive devices (also may not be covered by insurers).

- May require dosage adjustment due to extreme efficiency.
Selecting a Device For Your Patients
## Inhalation Device Feature Comparison

<table>
<thead>
<tr>
<th>Inhalation Device</th>
<th>pMDI</th>
<th>DPI</th>
<th>SMI</th>
<th>Standard Jet Nebulizer</th>
<th>Vibrating Mesh Nebulizer</th>
<th>Ultrasonic Nebulizer</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PORTABILITY</strong></td>
<td>Compact and portable</td>
<td>Compact and portable</td>
<td>Compact and portable</td>
<td>Limited portability</td>
<td>Fast, quiet, and portable (self-contained power source)</td>
<td>Fast, quiet, and portable</td>
</tr>
<tr>
<td><strong>ASSEMBLY AND CLEANING</strong></td>
<td>Little preparation required</td>
<td>Short preparation required</td>
<td>Complex assembly</td>
<td>Complex assembly and cleaning required</td>
<td>Cleaning can be difficult</td>
<td>Complex cleaning process</td>
</tr>
<tr>
<td><strong>COORDINATION REQUIREMENTS</strong></td>
<td>Requires coordinated actuation and inhalation</td>
<td>No coordination needed (breath actuated)</td>
<td>Requires coordinated actuation and inhalation</td>
<td>Minimal coordination needed</td>
<td>Minimal coordination needed</td>
<td>Minimal coordination needed</td>
</tr>
<tr>
<td><strong>OTHER FEATURES</strong></td>
<td>Multidose device with high reproducibility from dose to dose</td>
<td>Requires moderate to high inspiratory flow</td>
<td>Multidose device</td>
<td>Normal breathing pattern can be used</td>
<td>More efficient than other nebulizers</td>
<td>Most efficient nebulizer</td>
</tr>
<tr>
<td>Potential for high oropharyngeal deposition</td>
<td>Relatively high oropharyngeal impaction</td>
<td>Not dependent on inspiratory effort</td>
<td>May be appropriate in patients who have difficulty with handhold inhalers</td>
<td>Not compatible with viscous liquids or other liquids that crystallize on drying</td>
<td>Can be expensive</td>
<td>Not compatible with suspensions (e.g., inhaled corticosteroids)</td>
</tr>
<tr>
<td></td>
<td>Multidose devices available</td>
<td>No ICS available</td>
<td></td>
<td></td>
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</tbody>
</table>
In a 127-question, quantitative, web-based, descriptive, cross-sectional survey conducted by the ACCP of 499 patients with COPD in the United States:

79% reported 1 or more potential impediments to device use.  
58% reported 2 or 3 potential impediments to device use.

Percentage of Patients Reporting Potential Impediments to Optimal Device Technique (N=499)

<table>
<thead>
<tr>
<th>Impediment</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arthritis</td>
<td>44%</td>
</tr>
<tr>
<td>Difficulty with Fine-Motor Activities</td>
<td>36%</td>
</tr>
<tr>
<td>Poor Eyesight</td>
<td>33%</td>
</tr>
<tr>
<td>Depression</td>
<td>32%</td>
</tr>
<tr>
<td>Poor Hearing</td>
<td>29%</td>
</tr>
<tr>
<td>Anxiety</td>
<td>28%</td>
</tr>
<tr>
<td>Memory Problems</td>
<td>22%</td>
</tr>
<tr>
<td>Tremor</td>
<td>15%</td>
</tr>
</tbody>
</table>

Study participants were aged 55 to 74 years, predominantly former smokers, and were randomly chosen from a panel of individuals in the United States with self-identified COPD.
While many patients feel confident they used their delivery device correctly, patients using nebulizers were the MOST confident.\textsuperscript{11}
Factors to Consider When Prescribing Medication/Device Combination

<table>
<thead>
<tr>
<th>TECHNIQUE</th>
<th>PREFERENCES</th>
<th>COSTS</th>
<th>OTHER MEDICATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAN the person use the device?</td>
<td>WILL the person use the device?</td>
<td>IS it on the person’s formulary?</td>
<td>IS this administration device similar to others currently in use by the person?</td>
</tr>
<tr>
<td>DO they understand when and why to use it?</td>
<td>IS the copay affordable for the person?</td>
<td>ARE there patient assistance programs, coupons, or other cost mitigation strategies available?</td>
<td></td>
</tr>
</tbody>
</table>
Understanding Potential Risks

Fugitive Medical Aerosols
- Excess nebulized medication
- Exhaled (non-deposited) medication molecules

Contaminated Bioaerosols
- Cough
- Sneeze
Are Fugitive Aerosols a Concern?\textsuperscript{13}

Potential risks appear \textit{minimal} but are incompletely understood.
- Research is ongoing
- Use of proper personal protective equipment (PPE) is essential

Environmental conditions
- Care venue
- Room ventilation flow
- Nebulizer type and position
- Use of bacterial/viral filters
- Gas flow speed

Host factors
- Respiratory rate and pattern
- Pathogen load
- Cough frequency

Distance from source (patient)
Medication formulation
What About Contaminated Bioaerosols?

Incidence of Cough With Albuterol-Containing Medications

<table>
<thead>
<tr>
<th>PRODUCT</th>
<th>FORMULATION</th>
<th>% COUGH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albuterol Sulfate 0.083%</td>
<td>Nebulization Solution</td>
<td>3.1</td>
</tr>
<tr>
<td>ProAir® HFA</td>
<td>pMDI</td>
<td>—</td>
</tr>
<tr>
<td>ProAir RespiClick®</td>
<td>DPI</td>
<td>≥5</td>
</tr>
<tr>
<td>PROVENTIL® HFA</td>
<td>pMDI</td>
<td>—</td>
</tr>
<tr>
<td>VENTOLIN® HFA</td>
<td>pMDI</td>
<td>5</td>
</tr>
<tr>
<td>COMBIVENT® RESPIMAT®6</td>
<td>SMI</td>
<td>3</td>
</tr>
<tr>
<td>DuoNeb®</td>
<td>Nebulization Solution</td>
<td>1.7</td>
</tr>
</tbody>
</table>

Nebulizers generally induce cough at rates at or below inhalers.¹⁴
Summary

• Nebulized medications are an excellent option for ongoing therapy as well as urgent/emergent care.

• A variety of medications and nebulizer types allow matching between patient needs and therapy goals.

• If a patient is experiencing therapeutic failure with other inhaled medications, consider the use of nebulized meds of a similar class before advancing therapy.

• Nebulization poses minimal risk for caregivers even in the presence of infectious respiratory pathogens.
COPD Pocket Consultant Guide

- Free
- Available for **iOS** and **Android**
- Contains both Provider View & Patient/Caregiver View to facilitate communication
- Includes use and maintenance videos for different types of nebulizers
COPD Foundation Nebulizer Consortium

**RESEARCH**
Conduct basic science, clinical and patient-focused projects, and publication of relevant findings.

**EDUCATION**
Raise community awareness on nebulizer use in the COVID-19 environment and provide useful information to health care providers and those living with or caring for people with respiratory diseases.

**GUIDANCE**
Work with stakeholders to develop and promote guidelines for nebulizer use in various settings, including recommendations for health care providers.

**INDUSTRY**
(4 companies)

**CLINICAL & SPECIFIC EXPERTS**
(15 experts)

**GOVERNMENT & MEDICAL PROFESSIONAL SOCIETIES**

**COPD COMMUNITY**
References


What Is a Nebulizer?

A nebulizer turns liquid medication into a mist that you can breathe. Your healthcare professional may prescribe a nebulizer to help with breathing problems like COPD or asthma.

Medicines that are inhaled work directly at the site of problems (the lungs), meaning that less medicine is needed and the risk of side effects is lower.

Different nebulizers may look or work slightly differently. Always be sure to follow the instructions provided with your nebulizer machine, as well as your healthcare professional's advice. And don’t forget to wash your hands!
Nebulizers vs. Inhalers

Although certain medications (like albuterol) are available in both nebulizers and inhalers, there are important differences between the two.

<table>
<thead>
<tr>
<th>NEBULIZERS</th>
<th>INHALERS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Drug &amp; Device:</strong></td>
<td>Sold separately</td>
</tr>
<tr>
<td><strong>Power:</strong></td>
<td>Needs a battery or plug</td>
</tr>
<tr>
<td><strong>Size:</strong></td>
<td>Tabletop or handheld</td>
</tr>
<tr>
<td><strong>Breathing Technique:</strong></td>
<td>Normal</td>
</tr>
<tr>
<td><strong>Treatment time:</strong></td>
<td>Minutes</td>
</tr>
</tbody>
</table>
Nebulizer Tips

• Know how to use your nebulizer correctly.
• Clean your nebulizer daily to reduce the risk of infections.
• Put the compressor on a hard, flat, CLEAN surface.
• Do not cover any air vents or openings.
• Many nebulizer parts must be changed over time. Ask your health care professional how often to change them.
• Tell your health care professional if the medicine is working or not.
# Nebulizer Myths Debunked

<table>
<thead>
<tr>
<th>MYTHS</th>
<th>BUSTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>All nebulizers get contaminated by patient secretions.</td>
<td>Wash hands before using nebulizer. All parts should be cleaned/disinfected per manufacturer recommendations. Contamination can occur due to improper care of nebulizer parts or medication.</td>
</tr>
<tr>
<td>If sick people use nebulizers, they can spread germs to others.</td>
<td>The mist that comes out of the nebulizer has not been shown to spread germs. Proper hand washing prior to use of nebulizer equipment and proper cleaning of nebulizer after use is essential. If you are concerned, you can talk to your doctor about using an expiratory filter.</td>
</tr>
<tr>
<td>Nebulizers increase infection among health care workers.</td>
<td>When proper personal protective equipment (PPE) and procedures are used by health care workers, there is a very low risk of infection. There is no evidence that nebulizers increase risk of infection.</td>
</tr>
<tr>
<td>Nebulizers should not be used in people with active respiratory infections.</td>
<td>At home, if you have a viral or bacterial infection, use your nebulizer in a location with good air flow (on a porch or near a window) or away from others. Consider using a filter, if recommended by your doctor. Always clean your nebulizer as recommended by the manufacturer.</td>
</tr>
<tr>
<td>Inhalers should be used instead of nebulizers during pandemics.</td>
<td>Your doctor has determined the best medicine formulation and delivery system for you. You should not change without discussing with your doctor.</td>
</tr>
</tbody>
</table>
Additional Resources

The COPD Foundation invites you to check out our resources to help you learn more about COPD!

Guides for Better Living: Learn about different aspects about COPD, including how to cope with symptoms, therapies to improve your quality of life, and how to recognize flare-ups. [http://copdf.co/education-materials](http://copdf.co/education-materials)

COPD360social: Connect with others on the COPD journey, share thoughts and ideas, and ask questions to both peers and clinical experts in our specialized online community. [http://copdf.co/COPD360social](http://copdf.co/COPD360social)

Download our COPD Pocket Consultant Guide app (free for both Android and iOS) to develop an individual COPD action plan, get prompts and reminders for your next office visit, and much more.
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