



Hongihongi te rangi hou

Smell the fresh air

NZNO College of Respiratory Nurses monthly news bulletin Friday 28 June 2019

NZNO / section news

Consultation

NZNO is presently consulting with members on a range of issues.

[The full outline can be found here](#)

Support Workers (Pay Equity) Settlements Amendment Bill

NZNO invites your feedback on this Bill which aims to address historical inequalities and ensure support workers receive fair pay. The Bill seeks to do this by clearly defining the role of support workers, clarifying that mental health and addiction support workers are included. The bill would give effect to elements of the following settlement agreements:

- the Ministry of Social Development and Ministry for Vulnerable Children, Oranga Tamariki (Care and Support Workers Pay Equity) Settlement Agreement (see <https://www.msd.govt.nz/documents/what-we-can-do/providers/msd-and-mvcot-care-and-support-workers-pay-equity-settlement-agreement.pdf> and <https://www.orangatamariki.govt.nz/assets/Uploads/News/2017/Care-and-Support-Workers-Pay-Equity-Settlement-Agreement-2.pdf>) and
- the Mental Health and Addiction Support Workers (Pay Equity) Settlement Agreement 2018 https://www.health.govt.nz/system/files/documents/pages/mental_health_and_addiction_support_workers_pay_equity_settlement_agreement_2018.pdf

New pay rates would be related to the qualification held by support workers. Employers would receive government funding to facilitate new pay rates and back payment of previously underpaid employees.

[Please view the Bill here:](#)

Please send feedback to policyanalysts@nzno.org.nz by 18 July 2019

Posted in: [Consultations](#)

Cultural competence, partnership & health equity: MCNZ review

The Medical Council is reviewing the existing statements on *Cultural Competence* and *Best practices when providing care to Māori patients and their whanau* (last reviewed in 2006). Both documents have been revised to reflect current guidance and to provide greater clarity on the required standards of cultural competence and provision of culturally-safe care. The draft revised documents the council would like feedback on are:

Statement on cultural competence and the provision of culturally-safe care and

Achieving best health outcomes for Māori: a resource.

[Please feedback directly to the Medical Council via an online survey](#) by 10 July 2019.

Please note: Public submissions are now being invited on this Bill

- 27 Jun 2019 - **[Smoke-free Environments \(Prohibiting Smoking in Motor Vehicles Carrying Children\) Amendment Bill](#)**

This bill has just been released and not yet available through the NZNO page. However as it will be of interest to Respiratory nurses it is being included here

New Zealand

[NZ children to be part of international flu study](#)

Wellington children will be part of a major international research project aimed at developing a universal flu vaccine.

[\\$1.2m funding for allergy and asthma prevention research](#)

Asthma prevalence in New Zealand is amongst the highest in the world and there is no cure or effective prevention. A grant from the Health Research Council of New Zealand's annual project funding round will enable researchers to assess why biodiversity may reduce allergy and asthma risks in children.

General

[Good physical fitness in middle age linked to lower chronic lung disease risk](#)

Good heart and lung (cardiorespiratory) fitness in middle age is associated with a lower long term risk of chronic lung disease (COPD), suggests new research.

[Occupational hazards account for more than one in ten people with range of lung diseases](#)

More than 1 in 10 people with a range of non-cancerous lung diseases may be sick as a result of inhaling vapors, gas, dust or fumes at work, according to a new statement.

Air pollution

[International travelers' lung health impacted in polluted cities](#)

(Reuters Health) - When healthy international travelers visit a city with higher levels of particle pollution than at home, their heart and lung function quickly deteriorate, a small study suggests.

Asthma (inc paediatric)

[Study reports asthma control in older patients and shows lower ED visits](#)

Mount Sinai was part of the largest clinical trial for asthma self-management support in older patients, which resulted in improved control and quality of life, and fewer emergency department visits.

The items below are not available full text but may be sourced via a DHB library through databases like CINAHL or Proquest, or through the NZNO library service

Lv, S. , Ye, X. , Wang, Z. , Xia, W. , Qi, Y. , Wang, W. , Chen, Y. , Cai, X. and Qian, X. (2019), **A randomized controlled trial of a mobile application-assisted nurse-led model used to improve treatment outcomes in children with asthma**. J Adv Nurs. Accepted Author Manuscript. doi:[10.1111/jan.14143](https://doi.org/10.1111/jan.14143)

To evaluate the effectiveness of a mobile application-assisted nurse-led management model in childhood asthma.

Background

Studies have shown that a nurse-led asthma management model can improve asthma outcomes. However, the role of a mobile application-assisted nurse-led model in pediatric asthma management has not been studied well.

Breathing techniques

The item below is not available full text but may be sourced via a DHB library through databases like CINAHL or Proquest, or through the NZNO library service

Definition of a Yoga Breathing (Pranayama) Protocol That Improves Lung Function

Kupershmidt, Sabina PhD; Barnable, Traci MSN, RN

Holistic Nursing Practice: [July/August 2019 - Volume 33 - Issue 4 - p 197–203](#)

doi: 10.1097/HNP.0000000000000331

This study tests the hypothesis that yoga breathing (pranayama) improves lung function in healthy volunteers during a 6-week protocol. A randomized controlled pilot study demonstrated an improvement in peak expiratory flow rate and forced expiratory volume. The easy-to-learn approach can be translated to the inpatient and outpatient settings.

COPD

[Study supports optimal threshold for diagnosing COPD](#)

A new study provides evidence to support a simple measurement for diagnosing clinically significant airflow obstruction, the key characteristic of chronic obstructive pulmonary disease (COPD), the fourth leading cause of death in the United States. The study found that a 70% ratio of two indicators of lung function proved as or more accurate than other thresholds for predicting COPD-related hospitalizations and deaths.

Tian L, Zhang Y, Li L, *et al*

[The efficacy of mindfulness-based interventions for patients with COPD: a systematic review and meta-analysis protocol](#)

BMJ Open 2019;**9**:e026061. doi: [10.1136/bmjopen-2018-026061](https://doi.org/10.1136/bmjopen-2018-026061)

Introduction Chronic obstructive pulmonary disease (COPD) is a common chronic respiratory disease. It has adverse effects on patients' physical health, mental well-being and quality of life. The purpose of mindfulness-based interventions (MBIs) is to raise non-judgemental awareness and attention to current internal and external experiences. This means the attention is shifted from perceived and involuntary inner activities to current experience, keeping more curious, open and accepting attitudes towards current experience. Although some studies on the intervention effect of MBIs in patients with COPD have been conducted, the results are controversial, especially on dyspnoea, level of mindfulness and

quality of life. Therefore, a systematic review of MBIs in patients with COPD is required to provide available evidence for further study.

ILD

[Does ambulatory oxygen improve quality of life in patients with fibrotic lung disease? Results from the AmbOx trial](#)

Andrew W. Creamer, Shaney L. Barratt

Breathe 2019 15: 140-143; DOI: 10.1183/20734735.0002-2019

The fibrotic interstitial lung diseases (ILDs) encompass a heterogenous group of conditions affecting the lung parenchyma, resulting in progressive, irreversible scarring. While prognosis varies between conditions, they commonly have a significant adverse impact both on health-related quality of life (HRQoL) and on survival. For idiopathic pulmonary fibrosis (IPF), the most common and fatal ILD, antifibrotic therapies (nintedanib [1] and pirfenidone [2]) have been shown to slow rate of progression, but the disease remains incurable. Management of all fibrotic ILDs therefore requires symptomatic and supportive care as well as interventions aimed at modifying the disease course [3].

Influenza

[From incubation to recovery: What happens when you get the flu?](#)

Flu season has arrived in New Zealand with "significant increases" in influenza-like illness reported in several parts of the country.

[Influenza outbreak hits Wellington schools with high absenteeism recorded](#)

Wellington schools and early childhood centres are bearing the brunt of an early-season influenza outbreak with a large number of children staying home, sick.

[Early season flu spike expected to drive up Christchurch Hospital admissions](#)

Flu season has hit Canterbury hard, with rates of up to 50 hospitalisations a day expected to grow even higher.

Inhalers

[Electronic inhaler monitoring reduces hospitalizations, ER visits in patients with COPD](#)

by [Cleveland Clinic](#)

In one of the first-of-its-kind studies, Cleveland Clinic researchers found that the use of electronic inhaler monitoring, in combination with a disease management program, is associated with reduced healthcare utilization in patients with chronic obstructive pulmonary disease (COPD).

Lung cancer

McCutchan G, Hiscock J, Hood K, *et al*

[Engaging high-risk groups in early lung cancer diagnosis: a qualitative study of symptom presentation and intervention preferences among the UK's most deprived communities](#)

BMJ Open 2019;9:e025902. doi: 10.1136/bmjopen-2018-025902

Objectives People at high-risk for lung cancer—current/former smokers, aged 40+ years, with serious lung comorbidity (ie, chronic obstructive pulmonary disease) and living in highly deprived areas—are more likely to delay symptom presentation. This qualitative study aimed to understand the influences on early presentation with lung cancer symptoms in high-risk individuals and intervention preferences.

Lung function

Thomas ET, Guppy M, Straus SE, *et al*

[Rate of normal lung function decline in ageing adults: a systematic review of prospective cohort studies](#)

BMJ Open 2019;**9**:e028150. doi: 10.1136/bmjopen-2018-028150

Objective To conduct a systematic review investigating the normal age-related changes in lung function in adults without known lung disease.

Pulmonary fibrosis

[IPF - Idiopathic Pulmonary Fibrosis](#)

Breathe 2019 15: 153-160; DOI: 10.1183/20734735.ELF152

This factsheet explains what IPF is, and how it can be diagnosed, treated and managed.

[Assessing quality of life of idiopathic pulmonary fibrosis patients: the INSTAGE study](#)

Guillermo Suarez-Cuartin, Maria Molina-Molina

Breathe 2019 15: 144-146; DOI: 10.1183/20734735.0016-2019

Idiopathic pulmonary fibrosis (IPF) is a chronic disease characterised by progressive lung interstitial fibrosis of unknown cause [1]. IPF incidence increases with older age and clinical manifestations include dry cough, exertional dyspnoea and overall progressive deterioration of patient quality of life (QOL) [1]. In the past decade, new treatment options have become available to treat IPF, such as nintedanib, an intracellular tyrosine kinase inhibitor. The INPULSIS trials evaluated the efficacy and safety of nintedanib *versus* placebo in 1066 IPF patients with a diffusing capacity of the lung for carbon monoxide (D_{LCO}) of 30–79% of the predicted value [2]. These trials showed that treatment with nintedanib slowed the rate of forced vital capacity (FVC) decline but no significant difference was observed in the St George's Respiratory Questionnaire (SGRQ) score [2].

Kamiya H, Panlaqui OM

[Prognostic factors for acute exacerbation of idiopathic pulmonary fibrosis: protocol for a systematic review and meta-analysis](#)

BMJ Open 2019;**9**:e028226. doi: 10.1136/bmjopen-2018-028226

Introduction Idiopathic pulmonary fibrosis (IPF) is a form of chronic fibrosing interstitial pneumonia with unknown disease aetiology. Acute exacerbation (AE) of IPF is an accelerated disease progression beyond its expected course. A 30-day mortality of AE of IPF is 40%. While death may occur, there is much variation in the clinical progression of this condition. Previous attempts have been made to investigate various possible prognostic factors for AE of IPF; however, they have yet to be confirmed. The aim of this systematic review is to clarify these prognostic factors.

Smoking (inc vaping and electronic cigarettes)

[Bill banning smoking in cars with children passes first reading](#)

A bill that would prohibit smoking in cars with children inside has passed its first reading in Parliament.

['Stop hiking tax on tobacco' - expert](#)

Last year, Māori spent \$1 billion on tobacco, which equates to \$723 million in tobacco taxes. But how does that money get Māori to stop smoking? Dr Marewa Glover has spent more than 25 years on efforts to reduce smoking harm among Māori and says it's time to stop hiking the tax on tobacco. She's questioning why the government keeps raising it.

[New vaping to quit smoking website launches](#)

A new website (vapingfacts.health.nz) is being launched today by Associate Minister of Health Jenny Salesa to provide New Zealanders with a source of clear and credible information about vaping as a way to stop smoking.

"In New Zealand, 5,000 people die each year from smoking-related illnesses. While vaping products are not harmless to health, they are much less harmful than smoking," says Jenny Salesa.

Jumbe S, James WY, Madurasinghe V, *et al*

[Evaluating NHS Stop Smoking Service engagement in community pharmacies using simulated smokers: fidelity assessment of a theory-based intervention](#)

BMJ Open 2019;**9**:e026841. doi: 10.1136/bmjopen-2018-026841

Objectives Smokers are more likely to quit if they use the National Health Service (NHS) Stop Smoking Service (SSS). However, community pharmacies experience low service uptake. The Smoking Treatment Optimisation in Pharmacies (STOP) programme aims to address this problem by enhancing staff training using a theory-based intervention. In this study, we evaluated intervention fidelity using simulated smokers (actors) to assess smoker engagement and enactment of key intervention components by STOP trained staff.

Rajani NB, Weth D, Mastellos N, *et al*

[Use of gamification strategies and tactics in mobile applications for smoking cessation: a review of the UK mobile app market](#)

BMJ Open 2019;**9**:e027883. doi: 10.1136/bmjopen-2018-027883

Objective Mobile phone-based interventions have been proven to be effective tools for smoking cessation, at least in the short term. Gamification, that is, the use of game-design elements in a non-game context, has been associated with increased engagement and motivation, critical success factors for long-term success of mobile Health solutions. However, to date, no app review has examined the use of gamification in smoking cessation mobile apps. Our review aims to examine and quantify the use of gamification strategies (broad principles) and tactics (on-screen features) among existing mobile apps for smoking cessation in the UK.

Shearston J, Lee L, Eazor J, *et al*

[Effects of exposure to direct and secondhand hookah and e-cigarette aerosols on ambient air quality and cardiopulmonary health in adults and children: protocol for a panel study](#)

BMJ Open 2019;**9**:e029490. doi: 10.1136/bmjopen-2019-029490

Introduction Use of alternative nicotine delivery systems, such as electronic cigarettes and hookahs, has increased dramatically in the USA, but limited research has been conducted on the secondhand effects of these products, especially in children. The objective of this study is to assess the cardiopulmonary effects of e-cigarette and hookah use in vaping and smoking adults, and in non-smoking/non-vaping adults and children exposed to secondhand particles and gases.

General items of interest

The above bulletin has been compiled by Linda Stopforth, SNIPS, on behalf of the NZNO College of Respiratory Nurses. It is for NZNO College of Respiratory Nurses only and must not be reproduced without their permission.

It is provided on the last Friday of each month and contains an overview of news items, articles and research papers of interest to the College members.

All links are current at the time of being compiled and distributed.

For feedback please contact your section administrator: DianaG@nzno.org.nz

To learn more about the College go to:

http://www.nzno.org.nz/groups/colleges_sections/colleges/college_of_respiratory_nurses

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Linda Stopforth, BA, Dip Bus; NZLSC, RLIANZA

PO Box 315 WELLINGTON 6140

PH: 04-383-6931 or 021-107-2455

email: stop4th@xtra.co.nz



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