How to use your Respimat inhaler

Inhalers are commonly prescribed for patients with asthma and chronic obstructive pulmonary disease (COPD) as they are very effective at delivering the medication straight to the lungs where it is needed.

Using your inhalers correctly is an important part of asthma or COPD treatment. You should be shown how to use inhalers properly by a healthcare professional when they are first prescribed.

You may occasionally experience problems using your inhalers, especially if it has been a while since you were shown the correct technique. This is very common and your healthcare professional can help you improve your inhaler technique.

Why is inhaler technique important?

- It allows the correct dose of medication to reach your lungs.
- It gives you better control of your condition.

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<th>Examples of Respimat inhalers</th>
<th>Spiriva Respimat</th>
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<td>Striverdi Respimat</td>
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Before using your Respimat inhaler for the first time

- You will need to insert a cartridge of medication into the Respimat inhaler. With the cap in place, press the safety catch and pull off the clear base. Insert the narrow end of the cartridge into the inhaler. Push the bottom of the cartridge against a hard surface to ensure it has gone in all of the way. Replace the clear base. Do not remove the cartridge once it has been inserted in to the Respimat inhaler.
- The Respimat inhaler also needs to be primed before use. Twist the base in the direction of the arrows on the label until you hear a click, (about half a turn). Flip the cap until it clicks into the open position. Point the inhaler to the ground and press the dose release button once, and then close the cap. You need to repeat this sequence of twisting the base, opening the cap, pressing the dose release button and closing the cap, until a cloud of medication is visible. Once you see a cloud, you need to repeat the process three more times before your inhaler is ready to be used.

Checklist for Respimat inhaler use

<table>
<thead>
<tr>
<th>No.</th>
<th>Step</th>
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<tbody>
<tr>
<td>1</td>
<td>Stand or sit upright when using your Respimat inhaler.</td>
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<td>2</td>
<td>Hold the Respimat inhaler upright, with the cap closed. Turn the base in the direction of the arrows on the label until it clicks (half a turn).</td>
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<td>3</td>
<td>Open the cap until it snaps fully open.</td>
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<td>4</td>
<td>Breathe out gently as far as is comfortable away from mouthpiece and do not breathe in again yet.</td>
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<td>5</td>
<td>Place the mouthpiece between your teeth without biting and form a good seal around it with your lips. Do not cover the air vent.</td>
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<td>6</td>
<td>Point your Respimat inhaler to the back of your throat.</td>
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<td>7</td>
<td>Breathe in slowly and deeply through your mouth and at the same time press the dose release button. Continue to breathe in slowly for as long as you can.</td>
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<tr>
<td>8</td>
<td>Remove the Respimat inhaler from your mouth and hold your breath for 10 seconds or as long as is comfortable, then breathe out slowly.</td>
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<tr>
<td>9</td>
<td>Repeat steps 4 to 8 so that you get the full dose.</td>
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<tr>
<td>10</td>
<td>Close the cap.</td>
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Patient information leaflet for Respimat inhalers
Common problems
Common mistakes that people make with the Respimat inhaler include:

- Not standing or sitting up to use the Respimat inhaler.
- Not inhaling strongly enough to draw the medication out of the Respimat inhaler and in to your lungs.
- Not pressing the dose release button whilst breathing in.
- Blocking the air vent or inhaling through the air vent.
- Not holding your breath long enough after breathing in the contents.
- Breathing out through the Respimat inhaler (remove the Respimat inhaler from your mouth first).
- Not closing the cap.

Trouble shooting - What if…

- I can't turn the base easily - The Respimat inhaler is already prepared and ready or it is locked because it is empty, so you need to start a new one.
- The cap has come off – It can be easily reattached.
- I can't press the dose release button – This means that the base has not been turned so turn it until you hear a click (turn it half a turn).
- The base springs back after I have turned it – The base has not been turned enough so turn it until you hear a click (turn it half a turn).
- I can turn the base past the point where it clicks – This means that the dose release button has been pressed or the base has been turned too far. To solve it close the cap and turn the base until it clicks (turn it half a turn).

Useful tips

- Discard the Respimat inhaler three months after first use.
- If the Respimat inhaler has not been used for more than seven days release one puff towards the ground.
- If the Respimat inhaler has not been used for more than 21 days it will need to be primed again as described above.
- A dose indicator on the inhaler will tell you approximately how many doses you have left. When the dose indicator enters the red area of the scale there is approximately seven days worth of medication left. Once the dose indicator reaches the end of the scale the inhaler is empty and locks automatically so no more doses can be released.
- Always check that nothing is blocking the mouthpiece.
- Always close the cap after use.
- Clean the mouthpiece including the metal part inside with a damp cloth or tissue, at least once a week.
- Minor discolouration in the mouthpiece does not affect the performance of the Respimat inhaler.
- Speak to your nurse or pharmacist if you experience problems opening or using your Respimat inhaler.
- Always read the patient leaflet provided with your Respimat inhaler for any specific instructions.

How did I do?

For video demonstrations on how to use your inhaler visit: https://player.vimeo.com/video/178874074

Please make an appointment to reassess your inhaler technique in:

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<th>3 months</th>
<th>6 months</th>
<th>12 months</th>
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