

RESPIRATORY HEALTH RESOURCE BOOK FOR INDIGENOUS PEOPLES

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Vancouver Coastal Health Research Institute and The
Legacy for Airway Health

Funded by Michael Smith Health Research BC

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ACKNOWLEDGEMENTS & DISCLAIMERS

We would like to thank and acknowledge the Legacy for Airway Health team for their support and contributions to this guidebook.

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- Dr. Erin Shellington, Research Associate, Legacy for Airway Health
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THANK YOU

We would also like to thank and acknowledge the community partners and participants who were involved in this work from the Musquam and shishalh Nations.



Disclaimer: The information provided in this document, including but not limited to, graphics, images, and text, is **NOT** intended to be a substitute for professional medical advice from a health care provider. We strongly recommend that individuals always consult qualified healthcare providers regarding their medical condition(s), diagnosis, treatment options, and health routine. Please do NOT ignore or delay seeking professional medical advice from a healthcare provider based on the information provided in this document.

ASTHMA



What is asthma?

Asthma is a chronic inflammatory lung disease. Individuals with asthma always have a little bit of swelling inside the airways of their lungs. Swelling limits the airflow by narrowing the airways and causes difficulties in breathing. The narrowing of the airways can be triggered by various environmental factors and even emotions. These triggers vary from person to person. Some examples of triggers are dust, pollen, and air pollutants such as tobacco smoke and vehicle exhaust.

What causes asthma?

The definitive cause of this condition is still unknown. But family history, genetics, allergies, lung infections, occupational exposures, environmental air quality, etc. can lead to the development of asthma.

SYMPTOMS

Symptoms of asthma can be different for everyone. Some common symptoms are:

- Wheezing
- Shortness of breath
- Chest tightness
- Coughing

INHALERS

Inhalers are used to treat asthma and Chronic Obstructive Pulmonary Disorder (COPD) by delivering the medication directly to your lungs through a device. Health Canada has approved a total of **60** respiratory inhalers for use, not including nasal sprays. You can find a comprehensive list of available inhaler options in the "resources" section.



INHALERS



TREATMENT

Asthma treatment varies from person to person. In this document, we discuss the two most common types. Please consult a healthcare provider to identify which option(s) may be better for you or your loved ones.

Controllers

Healthcare providers prescribe controller medications to treat long-term inflammation (swelling) in the airways to prevent asthma attacks. Once an individual starts taking controller medications, they may not see a difference right away. We recommended to not stop taking the controller medication unless advised by a healthcare provider as the inflammation may return. Controllers, for the most part, should not be used to treat a severe asthma attack.

How it Works

Combination inhalers contain two controller medications. One relaxes the airways, and the other controls asthma symptoms. Some side effects of combination inhalers are fast heartbeat, oral thrush (yeast infection), voice changes, and coughing.



Relievers

Relievers provide a short-term solution to breathing problems caused by tightened airways. They provide fast relief that is temporary. Therefore, individuals should carry reliever medication at all times, in case they experience asthma symptoms or an attack. It is important to note that relievers do not treat the underlying inflammation (swelling).

How it Works

Reliever ("rescue") inhalers relax constricted muscles around the airways to open up and ease breathing. Some side effects of reliever inhalers are nervousness, fast heartbeat, shaky hands, and headache.

ASTHMA

Improving Quality of Life

1. Know your triggers

The comprehensive document by Asthma Canada (see Resources) lists some common asthma triggers and avoidance strategies. It also contains information on how to harness strength through culture.

2. Live a healthy lifestyle by:

- a. Keep your living spaces dry and clean as dust mites tend to prefer humid conditions.
- b. Eating fresh vegetables and fruits
- c. Trying to limit the number of pets, if allergic

3. Plan an exercise routine that is fun

- Finding an “exercise buddy” may make the activities more enjoyable and foster a sense of accountability.
- Before planning an exercise routine, consult your healthcare provider to get proper treatment to control your asthma. It is important to be aware of your specific triggers. If symptoms of asthma begin to appear, stop immediately and use a rescue inhaler.

4. Be aware of the air

Individuals with asthma experience an increase in symptoms on days with poor air quality. Using the Air Quality Health Index (AQHI) developed by Environment Canada and Health Canada is a helpful tool to discover air quality in the community and its health impacts.

5. Get plenty of sleep

COPD

What is COPD?

COPD is the name for two major respiratory diseases that cause the airways to become blocked. These are obstructive **chronic bronchitis** and **emphysema**. These diseases can also occur separately. (14)

Causes of COPD

The most common cause of COPD in Canada is smoking tobacco. Some other causes are outdoor air pollution, genetics, burning biomass indoors for cooking or heating, secondhand smoke, and some workplace exposures. (1)



SYMPTOMS

- Shortness of breath, especially with activity
- Frequent coughing or wheezing
- Excess mucus production

LONG TERM IMPACTS

Individuals with COPD may sometimes sudden and worsened symptoms of the condition, also known as “flare-ups”. The long-term impacts of COPD tend to increase with more frequent flare-ups. Therefore, it is important to **manage flare-ups with medication and healthy habits**. Failing to properly address a flare-up can potentially lead to lung damage, making symptoms worse and contributing to more loss of lung function.

COPD can:

- Increase the risk of heart problems, frailty, depression, and dementia and affect quality of life.
- Cause shortness of breath that can lead to decreased activity. Prolonged periods of lack of physical activity can lead to a decline in physical function of the body and decrease the quality of life.

COPD

TREATMENT

Please consult your healthcare provider as they can recommend the medications that are best suited for you based on your symptoms. These medications cannot cure COPD but can provide symptom relief and reduce further lung damage.

Inhalers

Individuals with COPD commonly experience shortness of breath.

Bronchodilators medications help open up the airways to make it easier to breathe. These medications come in spray or powder form, called inhalers or puffers. Some bronchodilators work quickly and others work slowly.

Inhalers Side Effects

- Fast heartbeat
- Shaky hands
- Headache
- Thrush (yeast infection)]
- Voice changes
- Sore throat
- Coughing



Examples of Bronchodilators

Rapid-onset bronchodilators:

- Act quickly, can be used as needed, relieve shortness of breath within minutes. They usually come in a blue inhaler. Some examples are:
 - Ventolin[®] or Bricanyl[®] (lasts 4-6 hours)
 - Oxeze[®] (lasts for up to 12 hours)
 - Airomir[®], Bricanyl

Slow-onset bronchodilators:

- Compared to rapid-onset bronchodilators, they take longer to act. Some examples are:
- Atrovent[®] (lasts for 4-6 hours)
 - Serevent[®] (last up to 12 hours)
 - Spiriva[®] (lasts for 24 hours)

Inhalers with two bronchodilators:

- Healthcare provider may prescribe an inhaler that combines two types of bronchodilator medications so individuals don't have to carry around two different types of inhalers. Some examples are :
- Anoro[™], Ultibro[®], Combivent[®], Respimat[®], Duaklir[™], Inspiro[™]

Combined bronchodilator & corticosteroid:

- Depending on symptoms, a healthcare provider may prescribe an inhaler that combines a type of bronchodilator and a corticosteroid. The bronchodilator helps in relieving shortness of breath and the corticosteroid lessens the swelling in the airways. Some examples are:
- Advair[®], Breo[™], Symbicort

Improving Quality of Life with COPD

1. Be aware of your triggers

Triggers are different for everyone and it is best to seek professional medical advice to identify them.

2. Quitting smoking and/or vaping

Air quality may have an impact on COPD symptoms and exacerbations. Please stay indoors if the air quality is poor.

3. Physical activity can help improve symptoms of COPD

Always consult your healthcare provider to determine the intensity and frequency of physical activity that can be performed depending on the severity of COPD symptoms.

4. Get the flu, pneumonia, and COVID vaccine to protect yourself from lung infections

5. Ask your lung specialist about an Action Plan to help you manage your symptoms

6. Consult your healthcare provider before taking any over the counter medications (such as cough medicine, sleeping pills, aspirin, etc.)



ASTHMA RESOURCES



More information on asthma inhalers and videos on how to use them



Guide for healthy living with mild to moderate asthma



Legacy for Airway Health: asthma and COPD info and resources

COPD RESOURCES



Living well with COPD guide and action plan



Lung Health Foundation: Airway clearing "Huff" technique video



Lung Health Foundation: COPD information, F&Qs and resources

OBSTRUCTIVE SLEEP APNEA



What is Sleep Apnea?

Sleep Apnea occurs when breathing is shallow or stops during sleep. Your lungs don't get enough air and that causes low oxygen levels and stress on the body.

- The most common type of sleep apnea is **obstructive sleep apnea (OSA)**.
- **Central sleep apnea (CSA)**, which is the less common type, can occur in individuals who have had a stroke, heart failure, brain tumor, or brain infection where the brain's signal to breathe is affected.

Causes of OSA

Obstructive sleep apnea can be caused by various factors. These include enlarged tonsils, which can obstruct the airways and block airflow, having a recessed chin, being overweight, sleeping on one's back, or consuming alcohol before going to bed. (1, 22)

Symptoms:

Some common symptoms are:

- Daytime sleepiness
- Snoring
- Headaches
- Heavy tossing and turning during sleep
- Frequent nighttime urination
- Sore throat and/or sinus congestion

How is Sleep Apnea diagnosed?



A healthcare provider can diagnose sleep apnea based on your health history, by asking you to complete a questionnaire (such as the Epworth Sleepiness scale), and by suggesting that you complete a sleep study in a lab or at home. More information about sleep studies is provided in the "resources" section. (22)

What are the long-term impacts?

Individuals who have OSA are at risk of developing the following medical conditions:

- High blood pressure
- Heart issues (such as abnormal heart rhythm, heart failure, etc.)
- Depression
- Diabetes

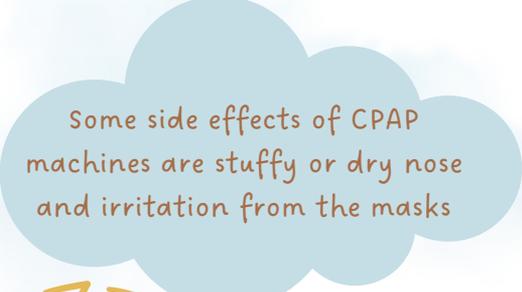
CPAP MACHINES

What is a Continuous Positive Airway Pressure (CPAP) machine

CPAP is a small and quiet air compressor that can be plugged into a standard electrical outlet. CPAP machines use nasal masks (CPAP masks) to bring the oxygen levels back to a normal range by keeping the airways open during sleep. Having the right sized mask that fits well is very important. Please consult your homecare company to determine your best fit. (23)

Benefits of using CPAP Machines

- CPAP machines reduce the risk of developing medical conditions such as high blood pressure, stroke, and diabetes. Furthermore, they can improve alertness and sex drive, reduce headaches, help with weight loss, and reduce restless sleep. (23)



Some side effects of CPAP machines are stuffy or dry nose and irritation from the masks



How to sleep comfortably with CPAP masks?

Taking the time to adjust and become comfortable with your CPAP mask is important. Here are some tips on how you can get comfortable with your mask:

- Try wearing the mask around your house while you do day-to-day activities such as folding laundry or washing the dishes.
- Wear your CPAP while watching TV or reading to get used to it.
- Keep your mask clean as it will fit better when the plastic is free of skin oils.
- If you see red marks from the mask on your face when you wake up, make sure to loosen the straps. Similarly, tighten the straps if it is too loose. Toggle until you get the perfect fit.
- It may take a week or longer to get used to your mask, so don't give up and wear your mask every night and all night long as OSA is known to be more severe during early morning hours.

Are there any other treatment options available?

- Lifestyle changes (such as weight loss)
- Oral breathing devices (nasal dilators)
- Medicines (it is not recommended to use medicines to treat OSA)
- Surgery

How to Improve Quality of Life with OSA:



Use mobile applications or apps to track your CPAP data. Most manufacturers have created apps that help you track your therapy progress.



Try to involve your loved ones in your journey. Their response to your therapy is important in helping you remain committed to the therapy.



Do not hesitate to talk to your homecare company. They are here to help you.



Contact a Sleep Program Educator to seek advice.



SMOKING CESSATION

What are some quit aids?

1. Nicotine Replacement Therapy (NRT)

NRTs, such as gums and patches, reduce cravings by providing your body with nicotine but do not contain the harmful elements found in tobacco smoke. NRTs are one of the most effective tools for quitting smoking and can increase the chances of quitting successfully.

- **Combination NRT (32):** To improve your chances of quitting successfully, you may choose to use two forms of NRT:
- **Long-Acting NRT**, such as nicotine patches, help relieve withdrawal symptoms through providing steady levels of nicotine over a long period of time.
- **Short-Acting NRT**, such as gum, inhaler or spray, and lozenge, can help in dealing with cravings as they deliver nicotine quickly

2. Prescription Medications

These medications reduce withdrawal symptoms and cravings by affecting the interaction between nicotine and the brain. They do not contain any nicotine themselves.



Tobacco use is responsible for 80-90% of COPD in the US

RESOURCES AND MORE INFORMATION

Smoking Cessation:

- FNHA: <https://www.fnha.ca/Documents/FNHA-Are-You-Trying-To-Stop-Smoking-Or-Vaping.pdf>
- Dads in Gear Indigenous: A Program for Men Who Want to be Involved, Healthy, and Smoke-Free Dads <https://dadsingearindigenous.ca/>
- Smoke Free Men: <http://smokefreemen.com/>

SMOKING CESSATION



What is the “best” quit method?

- HealthLink BC (2020) mentions that methods may work differently from person to person, the **most successful approach often involves a combination of quit aids (either NRT or medication) and behavioral support**, such as professional coaching or counseling.(33)
- Behavioral support can help by developing an individual's problem-solving abilities and an understanding of the motivations for quitting. It also involves identifying sources of support and personal strengths that can assist individuals in reducing or stopping smoking. (31)

The 2 most effective method to successfully quit smoking according to published literature are (34, 35):

- **Combination NRT** (long and short acting) and behavioral support OR
- **Varenicline** (a prescribed medication) and behavioral support

Supports for smoking cessation:

QUIT NOW

- QuitNow, a free program for British Columbians, offers telephone-based behavioral support through trained Quit Coaches, who can support you based on your circumstances and preferences.
- **The program allows individuals to select their quit plan, quit date, and choose quit tools.** Some examples of quit tools are behavioral coaching, peer support, a 3-month messaging service, etc.

Note: The BC Smoking Cessation only covers the cost of **one** NRT product. For Combination NRT, you will have to pay out of pocket for the second NRT product.

The program provides a comprehensive list of educational material that is available here:





Indigenous Quit Smoking
and Vaping Support

1 833 998-8255 (TALK)



TALK TOBACCO

Talk Tobacco is a free confidential program offering culturally appropriate support and information about quitting smoking, vaping and commercial tobacco use to First Nations, Inuit, Métis and urban Indigenous communities.



Talk Tobacco (launched by the First Nations Health Authority in partnership with Ontario Health's Indigenous Cancer Care Unit and Canadian Cancer Society) offers the following services:



- Live chat or call with a Quit Coach



- Join online community support groups
- Register to receive **FREE** Nicotine gum packs and patches



- Quit Calculator: find out how much you will save by quitting smoking

- The program uses an interpretation service to offer support in various indigenous languages.
- The program provides resources for those who wish to support a loved one in quitting smoking.

SCAN ME



PHARMACOLOGICAL SERVICES

BC Smoking Cessation Program

- The BC Smoking Cessation Program assists eligible BC residents of any age with the costs of quitting aids such as full cost of Nicotine Replacement Therapy (NRT) or some or all costs of smoking cessation prescription drugs.

Here are some things to note:

- To get NRTs (such as gum, lozenges, and patches), you **need to be enrolled in MSP**.
- No prescription is required. You can get NRT directly from pharmacy.
- Each calendar year (January 1 - December 31), you receive free Nicotine Replacement Therapy (NRT) for a duration of 12 consecutive weeks (equivalent to 84 days).

Tip: Start early October for 6 consecutive months of coverage.



Financial Coverage for Quitting Smoking

Smoking cessation prescription drugs can be prescribed by a pharmacist. (41)

Smoking cessation prescription drugs do not contain nicotine. To get them, you must be covered by the following PharmaCare plans:

- Fair PharmaCare – coverage depends on your deductible and family maximum
- Residential Care (Plan B) - Full cost covered
- B.C. Income Assistance (Plan C) - Full cost covered
- Psychiatric Medications (Plan G) - Full cost covered
- First Nations Health Benefits (Plan W) - Full cost covered

If you are covered by the plans mentioned above, BC PharmaCare will help pay for one of these prescription drugs for a 12 week course of treatment in a year (42):

- **Varenicline (Champix®)** - covered partially under PharmaCare) - It reduces nicotine cravings and withdrawals by blocking its effects.
- **Bupropion (brand name Zyban®)** - It changes the brains response to nicotine and makes smoking less pleasurable.

Financial Coverage for Quitting Smoking



More information on how to switch between NRTs, prescription drugs and what PharmaCare covers

Non-Insured Health Benefits Program for eligible First Nations and Inuit clients:

- The NIHB offers coverage for various health benefits that are not covered through private, social, and/or provincial/territorial health insurance programs.



To determine if you are eligible for NIHB



To find out more about what products are covered under FNHA

NIHB

NIHB includes 12 month coverage of:

- Gums, patches, lozenges, inhalers or spray
- Zyban® - 360 tablets per year
- Champix® - 330 tablets per year
- NIHB can also provide coverage for individuals requiring multiple treatment products to manage cravings.
- Through Pacific Blue Cross (PBC), **FNHA clients are eligible for supplementary coverage** for NRT products for a 24 week period in a calendar year (January – December).
- The covered products are: Nicotine patches, Gum, lozenges, and/or inhalers

preventing a slip or a relapse

Quitting smoking is hard and you may experience the urge to smoke again during your quit journey. In some cases, individuals may have a “slip” or a “relapse”. A slip is when an individual who has quit smokes one or two cigarettes. A relapse is when an individual who has quit returns to regular smoking.

These tips may be helpful in preventing a slip or a relapse:

- Try to avoid a slip up. If you do, responding to it carefully is important to prevent a potential relapse. **Remember, if you slip a few times, you are not a smoker and it is not a sign of failure.** Many people have a few slip events during their quit journey.
- If you slip or relapse, consider adding a new treatment. Nicotine replacement and medicines maybe helpful. Consult your healthcare provider to determine which treatment is the best fit for you.
- If you relapse within 6 weeks of not smoking, nicotine withdrawal may not likely be the reason. Relapse may have occurred due to a situation that made you want a cigarette. This “situation” may vary from person to person. It is important to be aware of what this situation is for you and plan ahead on how to cope with it.



MASKS & AIR PURIFIERS



What is PM 2.5?

PM 2.5 or “**Fine Particulate Matter**” are very small particles that:

- Measure less than 2.5 micrometers in diameter (The largest PM 2.5 particles are about 30-times smaller than a human hair)
- Are suspended in the air
- Can be inhaled deep into the lungs and cause serious health problems. Children, older adults, and people with underlying lung conditions are at greater risk.

Sources of PM 2.5

Wildfires produce large quantities of PM 2.5 and other harmful pollutants. PM 2.5 is the component of wildfire smoke that poses the greatest health risk. Other outdoor sources of PM 2.5 include mobile vehicle emissions, agricultural and prescribed burning, emissions from certain industries, etc.

Indoor sources of PM 2.5 include woodsmoke from fireplaces and wood stoves in homes, tobacco smoke, some cleaning activities, burning candles, etc. Residential wood burning is one of the largest sources of PM 2.5 in BC.

Health Impacts



Exposure to PM 2.5 can irritate the airways and eyes and cause coughing, shortness of breath, worsening of heart and lung health symptoms, and decreased lung function. In addition to impacting your lungs and heart, there is evidence that PM 2.5 may also impact birth outcomes, diabetes, and cognitive functioning.

MASKS & AIR PURIFIERS



Mask Recommendations

- During periods of wildfire smoke and air pollution levels above the recommended levels, it is best to access spaces with cleaner air. Follow public health orders from your local health authority and check the air quality to determine when to seek shelter in spaces with cleaner air.
- If you need to go outside in smoky conditions or cannot avoid exposure to air pollution levels beyond the recommended levels, experts recommend using a well-fitting N95 mask to protect yourself from negative health effects. N95 means that the mask can block 95 percent of the particles that are 0.3 microns in size or larger, which includes PM 2.5.

IMPORTANT

- Surgical masks are **not** helpful in providing protection against MP 2.5 present in wildfire smoke and polluted air.
- While a well-fitting N95 respirator can reduce to exposure to PM 2.5 and other particles, it does not reduce exposure to gases.

FNHA recommends using N95-rated masks while entering burned-out areas to reduce exposure to harmful fine particles such as ash and soot.



MASKS & AIR PURIFIERS



- The Government of Canada and the First Nations Health Authority (FNHA) recommend using air purifiers, also known as Portable Air Cleaners (PACs), with a **High Efficiency Particulate Air (HEPA)** filter to reduce your exposure to indoor and outdoor sources of PM 2.5.
- They are effective at reducing the amount of fine particles (such as PM 2.5) indoors by up to 80%, making them particularly advantageous for individuals at a higher risk of negative health effects caused by air pollution and wildfire smoke (e.g., seniors, pregnant individuals, infants, those with lung conditions).



Tips on Choosing an Air Purifier

- Check for an Association of Home Appliance Manufacturers (AHAM) certification.
- Know the square footage of your room. The purifier you purchase will depend on it.
- When you buy an air purifier, look for the Clean Air Delivery Rate (CADR) and Minimum Efficiency Reporting Value (MERV) numbers on the package label. The higher these numbers are, the more efficiently your air purifier can remove particles in the air

How to use an air purifier to
filter wildfire smoke:





SUPPLEMENTAL OXYGEN

- Individuals who have or may have medical conditions such as COPD, pulmonary fibrosis, lung cancer, and obstructive sleep apnea (OSA) **may need supplemental oxygen for varying durations throughout their lives.**
- In some cases, oxygen is only needed short term after a flare up.
- It is important to note that not everyone who has COPD, pulmonary fibrosis, lung cancer, and obstructive sleep apnea (OSA) needs supplemental oxygen; this is why it is **important to consult a healthcare provider to gain a better understanding of your specific needs.**
- The Home Oxygen Program (HOP) helps individuals who have low oxygen levels by providing home-based oxygen therapy. It operates province wide, in all health authorities, and reports to the Ministry of Health.

The HOP provides the following services:

- Equipment setup
- Education
- Ongoing services

The Ministry of Health (MoH) sets the criteria for the HOP funding based on research and recommendations from professional associations/societies.

- **MedPro Respiratory Care** and **VitalAire Healthcare** are the two private companies that hold the oxygen contracts in the province.

For more information, please visit their websites:



Vitalaire



MedPro



How to Get Oxygen

1.

Your healthcare provider will apply to the Home oxygen program (HOP) for you

2.

After a review of your application, the HOP will determine if you qualify to receive home oxygen

3.

If you qualify, the health authority will cover the costs of your home oxygen. If you have extended health benefits, the cost that is not covered by your plan will be paid by the HOP

4.

HOP will arrange for a Respiratory Therapist to do a home visit so they can determine your oxygen needs and answer any questions you may have

Tips for leaving home if you use additional oxygen supports

Having to use oxygen does not mean you need to stay at home. Whether going out for a short walk, shopping or to visit friends and family, staying active is an important part of maintaining good health.

Your home oxygen provider will provide you oxygen tanks or a portable oxygen machine (concentrator), allowing you to leave your home with ease. Your home oxygen company will determine the best equipment for you, but don't hesitate to talk to them if you think the provided equipment doesn't suit your needs.

Here are some tips on how to plan:

- **Make sure you have enough oxygen for the time you will be out** – your oxygen supplier can give you a chart showing how long each tank will last. If you use a portable oxygen concentrator, take your charging cord or extra battery and ask for guidelines around how long the batteries will last.
- Your tank should come with a carry bag or cart. Make sure you can manage carrying it or arrange for someone to help you if needed. If this is too difficult, call your oxygen provider and ask for suggestions or alternate equipment.
- **Prioritize safety.** Keep yourself at least 6 feet away from all sources of heat or flames such as stoves, fireplaces, campfires, heaters, etc.
- If you smoke, you cannot smoke with your oxygen on so you need to remove your tubing from your face and keep your oxygen 6 feet away. If you are around people who smoke, keep your distance. It is safe to walk past someone on the street who is smoking.
- If you have a rescue inhaler, keep it with you at all times, just in case you feel short of breath.
Use your breathing techniques when you are exerting yourself.
- **Plan shorter trips to start with.** You can increase the duration of the trips once you are confident that carrying oxygen won't prevent you from enjoying the time spent outside your home.



MENTAL HEALTH & WELLNESS



Vancouver Aboriginal Health Society	<p><i>Phone:</i> 604-254-9949 <i>Address:</i> 449 E Hastings St., Vancouver <i>Website:</i> https://vaahs.life/social-services</p>
Kilala Lelum Primary Care Clinic	<p><i>Phone:</i> 604-620-4010 <i>Address:</i> 626 Powell St., Vancouver <i>Website:</i> https://kilalalelum.ca/clinics-programs/programs/primary-care/</p>
FNHA Menal Health and Wellness supports	
Lu'ma Medical Centre (Traditional and Elder care available)	<p><i>Phone:</i> 604-558-8822 <i>Address:</i> 2970 Nanaimo St., Vancouver <i>Website:</i> http://lnhs.ca/luma-medical-centre/</p>

***Also contact your band to access their community health services**



LUNG TRANSPLANT



Transplant Centre:

Vancouver General Hospital



Organ Transplant Program at Vancouver General Hospital (25):

This program at the Vancouver General Hospital provides the following services for Lung transplant recipients:

- Pre-transplant assessment
- Transplant surgery and perioperative care
- Post-transplant care

Seeking services at this location (24):

To be eligible, you must:

- Have a Personal Care Card Number
- Be a resident of British Columbia
- Have a referral from your specialist to the Lung Transplant Team at Vancouver General Hospital.
- Once you are referred to the Lung Transplant Team by your specialist, they will carefully assess your situation. This will be done through physical examination and medical history, laboratory investigations and psycho-social evaluation.

Who are the members of the “Lung Transplant Team”?

- The “Lung Transplant Team” team includes respirologists, thoracic transplant surgeons, nurse coordinators, social workers, dietitians, pharmacists, physiatrists and psychologists.
- The transplant centre will let you and your health care team know once you have been placed on a waiting list. It may take some time (days, months, or even years) before you receive a transplant.

LUNG TRANSPLANT

Who is a “good candidate” for lung transplant? What if you are not a good candidate?

- Potential candidates are usually otherwise **in good health who have advanced lung disease which has not responded to optimal medical therapy** for their condition, including pulmonary rehabilitation.
- Individuals who have other serious underlying medical conditions or active infections may not be suitable candidates for lung transplantation. If your healthcare provider determines that you are not eligible for a lung transplant, the focus of care may shift towards ensuring your comfort and well-being.
- Lung transplant is generally appropriate for individuals without major comorbidities under the age of 70 with BMI (body mass index) between 16-30. Visit this link to learn more about BMI: <https://www.healthlinkbc.ca/healthy-eating-physical-activity/forms-and-tools/body-mass-index-bmi>.

COVID-19 information for transplant patients

- **All pre- and post-lung transplant patients, are required to get fully vaccinated against COVID-19 including appropriate boosters.**
- The vaccine will help in reduce the likelihood of developing severe disease that may cause hospitalization and even death.
- If you test positive for COVID-19, please let the transplant team know. If you are a transplant recipient, you will be able to access COVID-19 treatment on a priority basis.
- It is important to note that if you recently had COVID-19, it is recommended that you wait at least 6 months to get the additional dose of COVID-19 vaccine.

For the most up to date information around COVID-19 vaccine recommendations for transplant patients, please visit:



BC Transplant



BCCDC



LUNG TRANSPLANT

What is a lung transplant?

A lung transplant is a surgical procedure that is performed to replace one or both lungs if they have stopped working or stopped working well due to lung disease. (24)

Why are lung transplants performed?

Some individuals have often tried other medications or treatments for their underlying chronic lung conditions, such as cystic fibrosis, emphysema, and pulmonary fibrosis, but their condition does not show much improvement. In such cases, a lung transplant may be recommended. It is important to note that a team of healthcare providers will perform the necessary assessments to determine eligibility. Based on assessment results, they will determine whether or not an individual is a good candidate for a transplant.

How to get a lung transplant

There is one transplant centre in British Columbia for lung transplantation. BC Transplant, a Provincial Health Services Authority (PHSA) program oversees all aspects of organ donation, while Vancouver Coastal Health is responsible for transplantation at this locations.

Read more through BC Lung Transplant's website here:





Thank you
for being here!

If you have any questions about this resource book, please contact the VCH Indigenous health research team:
Dr. Brittany Bingham, Director, Indigenous research
brittany.bingham@vch.ca

NOTES



Patient Questions Sheet

TO HELP PREPARE FOR
APPOINTMENTS WITH YOUR
CARE PROVIDER



Appointment date:

Appointment time:

Care Provider's name:

Appointment location:

Questions for your provider:

REMEMBER

- ✓ If you don't understand something, ask your care provider to explain further
- ✓ Clarify the care provider's instructions before you leave
- ✓ Remember that you are the advocate for your own health



Patient Questions Sheet

TO HELP PREPARE FOR
APPOINTMENTS WITH YOUR
CARE PROVIDER



Appointment date:

Appointment time:

Care Provider's name:

Appointment location:

Medications list:

Questions for your provider:

REMEMBER

- ✓ If you don't understand something, ask your care provider to explain further
- ✓ Clarify the care provider's instructions before you leave
- ✓ Remember that you are the advocate for your own health

Mapping INDIGENOUS PEOPLES EXPERIENCES

LIVING with RESPIRATORY DISEASE & Accessing Healthcare

Pre-diagnosis & Prevention

Disease Prevention



CULTURALLY APPROPRIATE

education centered around respiratory disease prevention strategies

Geographic Disparities
Accessing Care

LACK OF ACCESSING SPECIALISTS Both on and off Reserve

Community-Specific Environmental Concerns

wildfire smoke

DUST AND POLLUTION from proximity to LOCAL Gravel Pit and AIRPORT

SEWAGE emptying into LOCAL RIVER...

Diagnosis



LIMITED EDUCATION & INFORMATION around RESPIRATORY DISEASES & TREATMENTS

INCREASE in the NUMBER OF YOUNG PEOPLE diagnosed with RD & requiring INHALERS

Accessing Care & Care Management

NEED CULTURALLY SAFE CARE

Anti-Indigenous Racism & discrimination experienced when accessing healthcare

Particularly of the HOSPITAL



Care Continuity

Addressing Environmental Concerns

Need For Impact Assessments AND TEST FOR AIR QUALITY



Quality of Care

Receiving PRIMARY CARE within COMMUNITY positively impacts COMMUNITY members' Health & Wellbeing

PHARMACISTS

are HELPFUL to COMMUNITY MEMBERS



More information is needed around long-term DISEASE OUTCOMES & how to access & use treatments such as:

- INHALERS
- AIR PURIFIERS
- LUNG TRANSPLANTS



PATIENT AFFIRMATIONS

I know
what's best
for me and
my health

I deserve to be treated with
respect and kindness

**BE KIND
• TO •
YOURSELF**

I am an
advocate for
my health

I know my rights
as a patient
living with a
respiratory
disease

It's my right as a patient
to feel seen and heard

