

# COPD SUPPORT IRELAND

## Evaluating the experience of people living with COPD in Ireland – 2025 Report

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### Sample Size:

297 respondents nationwide

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### Purpose:

This report presents findings from an online survey of people living with Chronic Obstructive Pulmonary Disease (COPD) in Ireland, conducted in partnership with Leading Edge Group in September and October 2025. The aim was to capture the lived experience of COPD and enable the patient voice to inform service design, advocacy priorities, and day-to-day supports throughout Ireland.

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### Methodology:

The survey was hosted online and disseminated through COPD Support Ireland's channels (mailing lists, social media, peer networks) to reach people with COPD nationwide. Participation was voluntary and anonymous; no patient-identifiable information was collected. Questions combined multiple-choice items (to quantify experience across the population) and free-text prompts (to surface practical suggestions, nuance, and real-world examples). Responses were analysed descriptively, with thematic coding of comments to highlight recurring issues and opportunities.

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### Strengths and Limitations:

Key strengths include a nationwide reach through a trusted patient organisation COPD Support Ireland, focus on practical experiences across care settings, and the combination of quantitative and qualitative data.

Limitations include potential self-selection bias (respondents engaged with COPD Support Ireland may differ from the broader population), recall bias for past events, and digital access barriers for people less comfortable online. The survey centres on the patient experience of living with COPD.

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### Demographics & Diagnosis

- **Age:** 78% aged 65+, 21% aged 45–64.
  - **Diagnosis timeline:** 40% diagnosed before 2015; 16% in 2023+.
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### Survey Results:

- Shortness of breath, reported by 74.6% of respondents, was the most common initial symptom prompting individuals to seek medical advice, leading to a COPD diagnosis.
- There is an apparent reduction in respondents perceived time to diagnosis in those diagnosed with COPD in the past 5 yrs.

- 83.52% of respondents were satisfied with their care during the diagnosis process.
- 58.78% of respondents felt that overall their COPD care is better now compared to 5+ years ago.
- 32.96% of respondents reported that their COPD care feels well co-ordinated; 19.63% feel that it is sometimes co-ordinated and 27.41% feel that overall their COPD care is disconnected.
- In 72.53% of respondents, nothing prevents them from attending their healthcare appointments.
- 59% of respondents reported not having an agreed personalised care plan for their COPD (77% when 'unsure' response is also included).
- 38.85% of respondents feel extremely or very confident managing their COPD day-to-day; 41.37% feel moderately confident managing their COPD day-to-day.
- Survey respondents indicated confidence in seeking help from their GP surgery (59.4%) when symptoms change, while others turn to COPD support groups (10.8%) or hospitals (9.4%).
- 71.53% of respondents felt that their COPD care fits in well with their lifestyle and their personal goals.
- 27.7% of respondents would like better access to COPD treatments and pulmonary rehabilitation.
- 14.8% of respondents would like more information about their COPD.

#### **Smoking**

- 72.4% of respondents have quit smoking.
- 5.73% of respondents have converted from regular cigarettes to e-cigarettes/vapes.

#### **Pulmonary Rehabilitation**

- 61.92% of respondents have taken part in pulmonary rehabilitation.
- 74.18% of respondents felt that pulmonary rehabilitation was very/extremely beneficial in helping them manage their COPD.

#### **Vaccines**

- Most respondents reported being offered key vaccinations: flu (93%), COVID-19 (85%), and pneumonia (55%).
- 70.33% of respondents have taken up all offered vaccines.
- Where vaccines were not taken up, the main factors cited were worries about side effects (41%) and a need for clearer information or guidance (10%).

#### **COPD Flare-ups/Exacerbations**

- During COPD flare-ups, most respondents seek care from their GP (86%), with smaller proportions attending the Emergency Department (8%) or contacting the COPD Outreach Team (4%).

#### **Rising cost of living**

- While 44% of respondents noted no impact from the rising cost of living, one in four identified heating costs as an area of concern, pointing to opportunities for targeted support.

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### **Summary of Findings:**

Satisfaction with the diagnosis process was very high, though many respondents indicated they did not receive enough information at the time of diagnosis or lacked a personalised care or action plan. This is an area known to influence confidence in self-management. 80% of respondents indicated they were either very or moderately confident in managing symptoms day to day. The majority of respondents indicated that their overall COPD care was better now than 5 years ago.

62% of respondents had been referred to or completed pulmonary rehabilitation, with 74% highlighting the effectiveness of the programme.

Care coordination emerged as a mixed experience, with roughly one-third reporting well-coordinated care.

When symptoms worsen, the majority of respondents turn first to their GP, underscoring the importance of timely primary care access.

Barriers to attending routine appointments were low overall, though transport and mobility challenges were noted by some. Many respondents reported regular GP or practice-nurse reviews, while others relied more heavily on hospital outpatient clinics.

Overall, the survey highlights a strong reliance on primary care with variation in the information and coordination offered to patients. The findings point toward some opportunities to improve early diagnosis, promote wider uptake of action plans, promote pulmonary rehabilitation and vaccination, and to avoid the need for patients to attend Emergency Departments during flare ups.

On smoking cessation, it was encouraging to see that 72% of respondents had quit smoking. Access to structured support was variable. Several respondents reported receiving clear guidance from their GP or hospital team, while others indicated limited advice or follow-up support. This variation echoes international evidence showing that consistent, proactive cessation support is one of the most effective interventions for slowing COPD progression and improving long-term outcomes. The greatest reason for not taking up a smoking cessation programme was the patient feeling they were not ready for it.

Vaccination uptake was very positive overall, particularly for influenza and COVID vaccines, though not universal. A proportion of respondents reported uncertainty about which vaccines they should receive. Given the strong evidence that vaccinations reduce COPD exacerbations, hospitalisations, and mortality, the findings suggest an opportunity to strengthen vaccination messaging, reminders, and coordination across GP, community, and hospital services. Also messaging around the safety and efficacy could improve uptake and reduce misinformation.

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**Declaration:**

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