

# **COMM 311**

# **NCD TUTORIAL**

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# Case 1

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Abdullah a 44-year-old man came to you for help as he is thinking to quit smoking.

BMI 27

BP 136/ 84

Take a history and how are you going to counsel him to quit smoking?

# What areas are you going to discuss regarding smoking history?

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**Smoking history** (how many, how long, smokers around him at home or work)

**History of previous attempts of quitting?** How many times? Success or failure and why.

**Motivation to quit** (is he ready to quit smoking)

**General health issues** i.e. CVD, HTN, chronic cough, depression,.....

Explores **ICE** : (Have to be asked in history taking)

Idea: He wants to give up, will some medication help him , or there are other options to try ,

Concern: Mostly he is afraid to have lung cancer

Expecting: to get a advise on how to stop smoking

Chance for opportunistic screening (only asked e.g. BP)

**Family history:** CVD, Stroke, Cancer,.....

# How can you help him to quit smoking?

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- Discuss the **benefits** to quit smoking
- Discuss the **risks** associated with smoking (cancer, COPD, ect)
- Behavioral** smoking counseling (Avoid places used for smoking, tell family and friends about quitting smoking, firm refusal of cigarette from others).
- Discuss the different **pharmacological treatments** options and their efficacy.
- Brief him about choices of **Nicotine replacement therapy** or **varenicline** (Champix).....
- Agree on a **plan** to proceed with his quitting
- Define a date** to stop smoking (e.g. write a contract between physician and smoker, put this contract in a place to be seen daily, remove ash tray, through any cigarette at home, anything reminding for smoking)
- Respect his choice of advice on who to approach
- Encourage him to attend the Primary care **smoking cessation clinic**.
- Agree on discussing his success or failure attempts after **two weeks**

## Case 2

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Mona a 46-year-old woman came to check some results. She is totally asymptomatic.

BMI 31

BP 124/75

Fasting plasma glucose: 8.4 mmol/L (151 mg/dl)

2 hours post prandial: 13.7 mmol/L (247 mg/dl)

HbA1C: 8.4 %

Take a history and how are you going to manage her?

# Take a history based on her results?

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**Personal and social history:** Job, marriage, children,.....

She is newly discovered to be diabetic, start to take related history regarding diabetes:

**Symptoms** like polyuria, polydipsia, nocturia, loss of weight,

Duration of the symptoms.

**Symptoms of complication:** burning / numbness of foot, visual disturbances

**Risk factors:** Smoking, HTN, obesity, exercise, .....

**Nutritional status, daily life activity**

**Alcohol, H/O drugs**

**Family H. of DM (detail), HTN, CVD, .....**

**ICE**

# How are you going to plan her management including education and prevention?

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Appropriate education about **life style modification**

**Exercise:** Details, measures to decrease weight like walking (at least 150 minutes per week for at least 5 days and of brisk walking [Inform him to do such activity for at least 30 minutes daily) also to reduce risk and weight.

**Dieting:** Dietary advice, avoid excess sugar, reduce refined CHO, encourage vegetables, fruits and fibres, ....Low animal diet,

Advise for **foot care**; inspection, shoes,...

Offer referral to **dietitian**

Offer referral to **ophthalmologist**

Offer the patient **Glucometer** to do home monitoring blood glucose

The student may offer the start of **Metformin**

Offer requesting some **investigations** like FBS, HbA1C, Renal functions, Lipid, Albumin/creatinine ratio

The student will plan for follow up for control of diabetes after 3 months.

## Case 3

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You are seeing Mrs. Bakar, a 56 year old woman, in your clinic today. She is worried about a left breast mass, and would like you to tell her about screening availability.

**Take a focused history of her complaint and educate her regarding the recommendations of breast screening.**



# You should concentrate regarding

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## **Focused History**

- Onset of awareness of mass**
- Size of the mass and any change in size**
- Mastalgia**
- Associated discharge, including pus and blood (none)**
- Size/tenderness association with menstrual cycle**
- Nipple changes**
- Skin changes (on affected breast)**
- Systemic symptoms – weight loss, low energy, anorexia**
- Associated shortness of breath or chest pain**
- Changes in personality – suggestive of brain metastases**
- Bone pain – suggestive of bone metastases**

# You should concentrate regarding

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- Inquiries about date of menopause
- Pregnancy history
- Breastfeeding history
- History of chest radiation
- Age of menarche
- Alcohol history
- Smoking history (quantity in pack-years)
- Past and current use of hormone replacement and oral contraceptive pills

# You should concentrate regarding

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## Family history/risk factor history:

- Family history of breast, ovarian, or colon cancer
- Past history of breast masses

## **Past mammography results**

You have to offer to examine breast mass.

Addresses patient's concerns and educate her regarding screening guidelines

- Recommended age of screening
- Methods available; for this patient you have to request **Mammogram** and **US breast**.