

Integrating Buteyko technique into respiratory care can promote patient autonomy and reduce the need for drugs

Using Buteyko technique in respiratory care

In this article...

› How to integrate Buteyko breathing technique into a respiratory service

› Benefits of Buteyko for those with altered breathing patterns

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The British Thoracic Society's (2008) asthma guidelines recommend that people with asthma have self-management plans, but as a respiratory nurse specialist I have often found the basic self-management plan does not fit all patients.

Many patients resist and put up barriers to taking drugs or to the doses required to treat their respiratory condition. Buteyko breathing technique (BBT) can be used to improve asthma control and is included in the BTS guidelines. It hands back control to the patient and can reduce the amount of drugs they are required to take.

Integrating Buteyko into general respiratory care

Twelve years ago I attended a Buteyko taster session and several years later went on to undertake in-depth training. After I completed my training I returned to my hospital and discussed using the

technique with the respiratory consultants.

Initially only one consultant sent me patient referrals for BBT. However, as I began to demonstrate the benefits for patients and successful use of the technique, other consultants have now engaged with the service. I discuss my role and use of BBT with new doctors, and explain how they can refer patients to me.

I now use BBT to manage asthma, hyperventilation, altered breathing patterns and some patients with chronic obstructive pulmonary disease, both in outpatient clinics and on the wards.

Clinic organisation

I started using BBT for appropriate patients who were in any one of my three clinics. However, I found the standard 20-minute slots were not long enough to cover all the aspects that need to be dealt with, teach the breathing exercises effectively and be able to move the patients to the next stage of the technique. As a result, I am now arranging to change one of my clinics to 30-minute slots, which will give me more time with each patient and hopefully cohort the patients to one clinic.

Generally BBT is taught at weekly

sessions but as I can only see patients monthly I focus on home exercises and patient education, along with ensuring their background asthma is stable.

A month between sessions is not ideal and I feel progress would be quicker if the patients were seen more frequently. Some patients only need three visits but others may need up to 10 sessions.

Developing the service

Patients can experience many benefits from using BBT; many say they have greater control over panic attacks and experience fewer asthma attacks. I feel they gain breathing control quicker and use their bronchodilator inhaler less. The case study in Box 1 illustrates how patients can gain control of their symptoms. **NT**

● For more information on Buteyko breathing technique visit tinyurl.com/NT-Buteyko

References

British Thoracic Society (2008) British guidelines on the management of asthma. *Thorax*; 63: Suppl 4, sec9.1, iv82.

WHAT IS THE BUTEYKO BREATHING TECHNIQUE?

The central focus of the technique is for people to breathe less and to breathe more efficiently. This is achieved by the following:

- Encouraging breathing through the nose rather than the mouth
- Retraining breathing with a series of exercises to be practised regularly. These focus on relaxing the breathing muscles and the response to a feeling of a shortness of air to calm the breath rather than to breathe more
- Focusing on breathing quietly and gently
- Ensuring breathing is using the diaphragm and not involving the muscles of the upper chest while at rest
- Managing and minimising coughing

BOX 1. CASE STUDY

Mr Green has been seen by his GP, respiratory consultant and physiotherapist for his breathing difficulties and lack of asthma control. The consultant asked me to see him as an emergency.

I taught him elements of BBT immediately and followed up with a 30-minute session three weeks later. At

the end of the second session he said he had learnt more from BBT than with anyone he had seen in the past. He was upset no one else had recognised his mouth breathing as one of the main components of his breathlessness and, after just two sessions, he saw a difference in his ability to carry out tasks of daily life.