should also be considered. The most expensive device may not be the one that costs most but the one that is not being used correctly so more drug is required.

Conditions such as arthritis, poor eyesight or cognitive impairments can affect patients’ ability to use inhalers. Aids are available to help patients use pMDIs and Turbohalers.

HOW TO USE THE DEVICES
pMDI
The instructions for this device were described in a previous article (Heslop, 2008).

**Easi-Breathe**
- Shake inhaler, hold upright and open cap.
- Breathe out gently, put mouthpiece in mouth and close lips and teeth around it (the air holes on the top must not be blocked by the hand).
- Breathe in steadily through mouthpiece. Do not stop when the inhaler puffs. Hold breath for about 10 seconds.
- Hold inhaler upright and immediately close the cap.

**Turbohaler**
- Unscrew the cover and lift it off. Check the window to ensure the device contains enough medication.
- Hold the Turbohaler upright in one hand. With the other, twist the grip fully in one direction as far as it will go, then twist back as far as it will go. A click should be heard.
- Breathe out gently. Then place the mouthpiece between your lips and breathe in through your mouth as deeply and hard as you can.
- Take the Turbohaler out of the mouth and breathe out slowly.
- Replace the cover.

**Diskhaler**
- Take off the mouthpiece cover.
- To load a disk, pull out the white tray gently. Place the disk on the wheel so that the numbers face upwards, slide the tray back in.
- Hold the corners of the tray and slide the tray out and in. This will rotate the disk. Stop when the highest number is reached.
- Keep the Diskhaler level. Lift up the back of the lid until it is fully upright. This will pierce the blister. Close the lid.
- Breathe out as far as is comfortable.
- Keep the Diskhaler level and raise it to your mouth. Place the mouthpiece between your teeth and close your lips firmly around it.
- Suck in through your mouth, quickly and deeply.
- Hold your breath and remove the Diskhaler from your mouth. Hold your breath for 10 seconds.
- Turn the disk to the next number by gently pulling out the tray and pushing it in once.

**Accuhaler**
- Hold the outer case in one hand and put the thumb of your other hand on the thumb grip and push until you hear a click.
- Hold the inhaler with the mouthpiece towards you. Slide the lever away from you, as far as it will go – until it clicks. This opens a blister. A counter records how many doses remain.
- Breathe out as far as possible. Put the mouthpiece to your lips. Suck in quickly and deeply.
- Remove the Accuhaler from your mouth and hold your breath for about 10 seconds.
- Close the Accuhaler by sliding the thumb grip back towards you, as far as it will go. It will click when it is shut.

**HandiHaler**
- Open the dust cap of the HandiHaler by pressing the button on the side of the device. Pull the dust cap upwards and pull up the mouthpiece ridge.
- Remove a capsule from a blister and insert it in the centre chamber.
- Close the mouthpiece until you hear a click, leaving the dust cap open. Be sure that the mouthpiece sits firmly against the grey base.
- Hold the device by the grey base, being careful not to block the air intake vents. Raise the inhaler to your mouth and close your lips tightly around the mouthpiece.
- Keep you head upright and breathe in slowly and deeply. You should hear or feel the capsule vibrate.
- Breathe in until your lungs are full. Hold your breath for as long as is comfortable and remove the inhaler from your mouth.
- To ensure you get the full dose, breathe out completely and inhale again without pressing the piercing button.
- Open the mouthpiece, tip out the used capsule and discard. Close the mouthpiece and dust cap.

**SUMMARY**
Before prescribing treatment, healthcare professionals need to consider which inhaler would be most appropriate. However, choosing a device can be problematic and there are many issues to consider. If a patient struggles to use any inhaler, an alternative device should be sought.