



IDENTIFYING “TRUE” CASES OF COPD

SUMMARY

Professor Ana Menezes
Federal University of Pelotas
Brazil



- Nine presentations (from several countries)
- Cross sectional design
- Very interesting research findings



- Most of the studies pointed out “problems in diagnosing COPD”
 - Spirometric criteria:
 - Fixed ratio overestimates diagnosis - mainly in old people (*BOLD, Birmingham*)
 - Adjustment for age – minimizes the overestimation
 - LLN – intermediate prevalence
 - LLN + FEV1 < 80% predicted - is it a better criterion?

- UNDERDIAGNOSIS

- from 304 subjects with COPD, only 35 reported medical diagnosis (*BOLD - Austria*)
- reported medical diagnosis associated with severe obstruction and symptoms
- reported diagnosis (*Murphy*): underdiagnosis by doctors and patients (out patients and medical records)
- self reported prevalence by postal survey (*Miller*) – from 0.9% to 3%



Factors associated with underdiagnosis

- Reading suggestion:

Talamo C, Montes de Oca M. et al. Diagnostic Labeling of COPD in Five Latin American Cities CHEST 2007; 131:60–67.



- Case Validation Study (Toronto) – gold standard x health administrative records = algorithm
 - best sensitivity and specificity – at least 1 health service claim



- Quality of life – (*BOLD, Vancouver*)
 - physical domain: lower score and association with severity in COPD
 - mental domain: similar score
 - dyspnea score: graded increase with severity



- COPD in non-smokers – around 30% (very high)
 - risk factors: female gender and exposure to agricultural dusts (*Lamprecht – BOLD, Austria*)

Reading suggestion:

Yin P, Jiang CQ, Cheng KK, et al. Passive smoking exposure and risk of COPD among adults in China: the Guangzhou Biobank Cohort Study. *Lancet* 2007; **370**: 751–57.

Large sample size; exclusion of current and former smokers confirmed by urinary cotinine measurements; use of spirometry



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- Screening for COPD – (*PLATINO/BOLD*)

- PEF $\geq 70\%$ - NPV 99.8% for GOLD III-IV

- PEF $> 100\%$ - NPV 86.4% for GOLD II



PEF + RISK FACTORS = REDUCE FURTHER SPIROMETRY



CONGRATULATIONS TO ALL THE
PRESENTERS

THANKS
Session Chairs
Sonia Buist