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Title: Epidemiology of the "chronic bronchitis" phenotype of COPD-patients in Belgium and Luxembourg

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**Body:** Background: Epidemiologic studies indicate that the chronic bronchitis phenotype (CB) in COPD is associated with increased mortality, frequent exacerbations and disease progression. Aims and objectives: to investigate the prevalence of CB in a large cohort of COPD patients and identify features associated with CB. Methods: Cross-sectional analysis of a multicenter cohort of COPD patients from Belgium and Luxembourg. The cohort comprised 974 patients (67.8 ± 9.6 years; 72% males, FEV1 52.5 ± 15.8% predicted). Results: The prevalence of CB was 64 % (622/974). Between groups (CB vs no CB), no significant difference was observed for age, sex, smoking habit and prevalence of most comorbidities. However prevalence of cachexia and skeletal muscle wasting were higher in CB. The number of pack years was higher, and both FEV1 % predicted and body mass index were lower in CB. The proportion of patients with CB increased with GOLD stage and was higher in emphysema phenotype and patients exposed to occupational risk factors. Patients with CB had increased numbers of mild (0.7  $\pm$  1.9 vs 0.3  $\pm$  0.9; p = 0.002), moderate (1.1  $\pm$  1.4 vs 0.5 $\pm$  0.9; p < 0.0001) and severe (0.3  $\pm$  0.8 vs 0.2  $\pm$  0.6; p=0.0185) exacerbations per patient per year. Frequent (moderate to severe) exacerbations (two or more per patient per year) occurred more frequently in patients with CB (62.7 % vs 14.2 % of patients; p < 0.0001). Conclusions: prevalence of CB is high in COPD and increases with disease severity. CB is associated with occupational risk factors, occurrence of mild, moderate and severe exacerbations, frequent moderate or severe COPD exacerbations, and systemic co-morbidities such as cachexia and skeletal muscle wasting.