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**Title:** Multicentre longitudinal analysis of body mass index, lung function and sputum microbiology in primary ciliary dyskinesia

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**Body:** **BACKGROUND:** No studies have longitudinally assessed paired body mass index (BMI) and lung function in primary ciliary dyskinesia (PCD). Data about the relationship between sputum pathogens and spirometric evolution are also lacking. **METHODS:** We aimed to determine longitudinal BMI and spirometry changes in 162 PCD patients from London, UK (n=75), Naples, Italy (n=24) and Copenhagen, Denmark (n=63). Annual BMI and FEV<sub>1</sub> were analyzed over blocks of 2, 4 and 6 consecutive years. Isolation of *P. aeruginosa* (PA) from sputum was recorded in order to assess impact on lung function progression. **RESULTS:** Median age at first spirometry was 9 years (range, 4.2-27.2). Mean Z scores of first measured BMI and FEV<sub>1</sub>, were -0.02, and -1.37, respectively. There were no significant changes in BMI and FEV<sub>1</sub> slopes, over any time block. During the follow-up PA was not related to lung function evolution, even though patients with at least one isolation of PA showed a trend towards worse lung function at 2 years.

	N	FEV1 Z score slope*				
		2 yrs	N	4 yrs	N	6 yrs
Ever <i>P. aeruginosa</i>	69	-0.06 (-0.19 to 0.08)	51	-0.09 (-0.17 to -0.01)	38	-0.07 (-0.14 to 0.004)
Never <i>P. aeruginosa</i>	93	0.07 (-0.04 to 0.17)	59	-0.02 (-0.08 to 0.05)	43	-0.05 (-0.10 to 0.002)
p		0.053		0.10		0.76

\*Mean and 95% CI.

**CONCLUSIONS:** PCD subjects receiving centralized care show steady BMI and stable spirometry over medium term follow-up. Evolution of lung function could not be significantly correlated to PA isolation, although a trend was found towards decline of FEV<sub>1</sub> after 2 years of follow-up.

