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**Title:** Impact of atelectasis on survival in emphysema patients treated with bronchoscopic lung volume reduction

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**Body:** Recent studies show long-term improvement of emphysema patients following bronchoscopic lung volume reduction (BLVR), as well as an association of atelectasis with increased survival (Venuta, F., et al. Eur Respir J 2012;39: 1084–9; Hopkinson, N.S., et al. Eur Respir J 2011; 37: 1346–51). We have treated 68 patients with BLVR at our Emphysema Center. In the present study, we focus on an analysis of survival in 12 patients with lobar exclusion and radiological atelectasis and 32 patients with lobar exclusion without atelectasis. At baseline (day of treatment), mean age was 67.94 years. Mean heterogeneity score (difference between lobes in % area with parenchymal density < -950HU) was 30.58. Predicted survival according to BODE index was 20% in 4 years. Patients were analyzed from the day of treatment until death or study end (Dec/2012). Mean survival was 1,233 days for the overall group. At the end of follow-up, 22 patients had died, 3 with atelectasis and 19 with lobar exclusion without atelectasis. As shown in Figure 1, patients with lobar exclusion and atelectasis had a consistent survival benefit for the first three years after bronchoscopic lung volume reduction. Survival was increased in this group until the end of the fourth year after treatment. Lobar exclusion and atelectasis seem to forestall the natural decline of emphysema in patients with severe disease through mechanisms that deserve further investigation.