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**Title:** Contraindications and precautions with inhalation therapy in COPD. Awareness or unawareness, a questionnaire

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**Body:** Increased risk and mortality in COPD patients has been recently verified, when using inhalation therapy (LABA, LAMA, ICS) under certain clinical circumstances. Aims and objectives: To explore if medical doctors of different sub-speciality, age or clinical employment were aware of these recent clarified possible risks for COPD patients. Methods: An electronic questionnaire (SurveyXact) was forwarded in January 2013 to the medical doctors with an available email address in the Danish medical societies of A) pulmonary medicine (n=234), B) cardiology (n=1185), and C) geriatrics (n=58/206). Results: Doublets (n=15), active decliners (n=25) and non-functioning addresses (n=27) were excluded. Among the 1438 distributions, full responders were 407/1438 (28%) and partial responders 87/1438 (6%). Among physicians of the 3 respective societies and among non-specialists (group D), the proportions of never using contraindications or precautions towards LABA were 37%, 79%, 59%, and 65%, respectively (p=0.00002). The same proportions towards LAMA were 22%, 77%, 47%, and 64%, respectively (p<0.00001). The proportions towards ICS were 48%, 84%, 65%, and 75%, respectively (p=0.00001). Very few doctors (n=24) mentioned recent myocardial infarction, severe arrhythmias or severe heart failure as relative contraindications for LAMA inhalation. Conclusions: The proportions of doctors never using any contraindications towards LAMA, ICS or LABA were significantly higher among cardiologists and non-specialists. The recent indications of increased mortality in also specific cardiologic or nephrologic conditions using soft mist tiotropium in COPD, did not seem to influence the clinical practice, yet.