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**Title:** Stratification of patients with COPD by frequency of exacerbations is an essential step for what to treat in COPD – A survey in a real life COPD population

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**Body:** RATIONALE. COPD patients may suffer from recurrent exacerbations(ex). The phenotype of a "frequent exacerbator" experiences more rapid decline of lung function and health status and early death. With 2011 GOLD guidelines there is a tool to identify a group of patients(pts) with two or more ex per year and to better follow these pts over the course of the disease. Are there more ways to use frequency of ex to stratify pts, which group needs attention for ex or to improve lung function or alleviate dyspnea.

METHODS.Until the end of march 2013 several outpatient centers collected data of 1455 pts by a questionnaire over a period of the past three years. Pts were guided by the consulting pulmonologist or an instructed nurse to answer questions about demographic data, disease, medication, comorbidities and ex. Mild ex were unscheduled visits, moderate ex were treated with oral corticosteroids and severe ex were treated in the ED. COPD I (GOLD 2006) were 151, COPD II were 665, COPD III were 424 and pts with COPD IV were 215. RESULTS.784 pts did not experience an ex in three years.Ex in three years counted to a total of 2040 in the whole population, which corresponds to a rate of 1.4ex\3years, highest rate as expected in COPD IV. Rate of ex allowed stratification of 5 groups from no ex\3years to a very small group of 4 pts with 6 and more ex\3years.CONCLUSIONS.Exacerbations in general COPD populations are lower than in interventional studies(also see P.Lange AJRCCM 2012). First assessment before treating pts with COPD should be frequency of ex. Then treatment options can better be identified for symptoms and lung function.