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Title: Does non-cystic fibrosis bronchiectasis (nCF-BCt) determine extrapulmonary manifestations?

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Body: Introduction: Although nCF-BCt is a chronic and debilitating disease, its extrapulmonary effects have been poorly described in the literature. Objective: To evaluate the effects of nCF-BCt on exercise capacity, peripheral muscle strength, physical activity in daily life (PADL), and health-related quality of life (HRQoL) in adult subjects. Methods: Eighty subjects (50 women; 44 ± 14 yrs; fat-free mass index: 17 ± 2 kg/m²) with nCF-BCt and 30 healthy subjects (18 women; 44 ± 15 yrs; fat-free mass index: 17 ± 2 kg/m²) were evaluated. The subjects performed maximum voluntary isometric contraction of the quadriceps femoris (MVIC-QF), the incremental shuttle walking test (ISWT), and a maximum cardiopulmonary exercise test. PADL was assessed by the number of steps taken, calculated over three consecutive days (Yamax, PW-610 model, Tokyo, Japan). Dyspnea was rated according to the Medical Research Council (MRC) scale, and HRQoL was assessed using the SF-36 Health Survey Questionnaire. Results: Compared with the controls, the subjects with nCF-BCt presented with reduced aerobic capacity (VO2: 81 ± 15 vs 63 ± 13%) pred; p < 0.001), functional capacity (ISWT distance:  $73 \pm 15$  vs  $52 \pm 13\%$  pred; p < 0.001), and MVIC-QF  $(26 \pm 11 \text{ Kg vs } 22 \pm 10 \text{ Kg; p= } 0.046)$ . Lower PADL was also observed in the nCF-BCt patients (9526  $\pm$ 5843 vs 12009 ± 6031; p = 0.052), as well as poor HRQoL in most domains (statistically significant), except for pain and mental health. Conclusion: nCF-BCt is associated with extrapulmonary manifestations characterized by reduced exercise capacity, muscle strength, and PADL beyond impairment of HRQoL.