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**Title:** High mortality in COPD patients with isolation of aspergillus spp in bronchial secretions

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**Body:** Introduction: COPD is a risk factor for pulmonary aspergillosis (PA). Antifungal treatment in COPD patients and respiratory isolation of Aspergillus spp without radiographic findings remains controversial. Objective: to describe the clinical and functional characteristics of COPD patients with exacerbation and isolation of Aspergillus spp in bronchial secretions, and to compare the differences between invasive and non-invasive cases. Methods: we selected patients with Aspergillus spp in bronchial secretions for 6 years. Patients with aspergilloma, allergic bronchopulmonary aspergillosis, cancer or severe immunosuppression were excluded. Patients were classified according to main respiratory diagnoses. We collected data on clinical features, treatment and mortality for two years. The EORTC/MSG criteria for diagnosis of invasive aspergillosis was used. Results: 98 patients with 199 positive cultures were studied: COPD (69), asthma (10), post-tuberculosis sequelae (8), bronchiectasis (5), and other (6).

## Results

	COPD and invasive disease	COPD and semi-invasive disease	COPD and non-invasive disease
n (69)	10	11	48
FEV <sub>1</sub> pred.	36±15%	35±14%	35±14%
≥2 hospital admissions/year	80%	54%	33%
P. aeruginosa isolation	20%	54%	58%
Antifungal treatment	100%	100%	29%
All causes mortality 2 year	70%	45%	56%

Conclusions: COPD patients with PA have a high mortality rate per year regardless of whether they present invasive disease or not; only 1/3 patients with non-invasive aspergillosis received antifungal treatment. Early detection and anti-fungal treatment could be effective to improve survival in these patients. Coinfection with *P. aeruginosa* is frequently seen (almost 2/3) in non-invasive disease cases.