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Title: Relationship of mMRC and CAT scores in COPD patients

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Body: There are several validated questionnaires to assess symptoms in patients with COPD. For the assessment of symptoms in COPD, the GOLD document recommends either the use of a modified British Medical Research Council (mMRC) questionnaire or the chronic obstructive pulmonary disease assessment test score (CAT). Furthermore, GOLD proposes that a cut-off value of $2\leq$ in mMRC can substitute a cut-off value of $10\leq$ in CAT. However, no report can be found in the literature showing that those cut-off values are interchangeable. Therefore, we set out to investigate the relationship of those cut-off values. We studied 89 (70 men) consecutive, Caucasian, COPD patients. They had (mean±SD): age=69±8 y, pack-years=100±74 y, FEV_1, %pred=47±20, FVC, %pred=73±24, and FEV_1/FVC, %=51±12. Chronic dyspnoea was rated according to the mMRC 5-point dyspnoea scale. Health status was measured with the CAT. All patients reported some degree of dyspnoea (mMRC was 2.7±1.4). CAT score was 21±10. mMRC was significantly correlated with CAT score (r=0.788, p<0.0001). Backward stepwise regression between mMRC score and the individual CAT's questions showed that some questions (1, 2, 7, and 8) did not significantly add to the capacity of the equation to predict the mMRC score (r=0.790, p<0.05). mMRC was ≥ 2 in 65/89 (73%) patients and CAT was ≥ 10 in 77/89 (87%) patients. Statistical analysis showed that those cut-off values were significantly correlated (p<0.001). In COPD, mMRC dyspnoea score is closely related to CAT score, and hence these assessment tools may be used interchangeably.