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Title: COPD morbidity screening in high risk groups

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Body: Introduction Most of the COPD population remains unrecognized and high risk group screening find these patients. Aim To characterize the high risk patients and study the prevalence of COPD. Methods Patients from high risk groups were selected by GPs and directed to pulmonologists for evaluation and final diagnosis. The diagnosis was based on symptoms and spirometry (FEV1 values and FEV1/FVC below 0.7). SPSS 16.0 was used for statistical analysis. Results A total of 3054 patients were screened. The mean age was 62 years (SD±12.7). Males were 47.4%. COPD was newly diagnosed in 51.6% of all – 24.7% mild, 51.1% moderate, 21.3% severe and 3.0% very severe (according to GOLD 2007). The group of mild and moderate (group M) COPD patients comprised 75.8% of all diagnosed with COPD (mean age 63±11.4) versus 24.2% with severe and very severe (group S, mean age 67±9.6). The distribution of patients below 65 years (48.2% of all) was: 79.7% in group M and 20.3% in group S. Three percent of COPD patients were below 40 years: 93.3% in group M and 6.7% in group S. There is statistically significant relationship between the COPD diagnosis and male gender ($\chi^2=28.19$; $p < 0.001$), age ($t=-11,23$, $p<0.001$), dust exposition ($\chi^2=11.28$; $p < 0.001$), smoking status ($\chi^2=10.46$; $p < 0.001$), dyspnea ($\chi^2=1.08$; $p < 0.001$), cough ($\chi^2=98.52$; $p < 0.001$), frequent infections ($\chi^2=20.57$; $p < 0.001$). Conclusion The good cooperation between GPs and specialists leads to early detection of patients with COPD at younger age. There are symptomatic patients in high risk symptomatic groups without spirometric criteria for COPD. Detailed and careful evaluation of symptoms, medical history and spirometry is required for making the correct diagnosis.