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Title: Early versus late pulmonary rehabilitation on anxiety and depression in chronic obstructive pulmonary disease patients with acute exacerbations

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Body: Objective: Compare the effects of early and late pulmonary rehabilitation on anxiety and depression in COPD inpatients with exacerbations. Methods: We randomized 113 COPD patients with exacerbation to early(76) or late(37) pulmonary rehabilitation. After discharging from exacerbation, the early pulmonary rehabilitation started a rehabilitation program with 8-weeks. While the late accepted assessment again in the eight week after discharging. Taked the change of pre-post discharging as those patients who did not attend rehabilitation program. After finishing the second assessment, the late group also accepted a rehabilitation program as the early. Primary outcomes were anxiety and depression assessed by BDI and STAI. Secondary outcomes included lung function, dyspnea and 6-minutes walk distance(6MWD). Results: (1) Only 26 patients of the early and 20 patients of the late finished the program($\geq 70\%$). (2) Overall, patients' lung function were not improved. Anxiety, depression, dyspnea and 6MWD all were improved significantly over 8 weeks among three groups. Moreover, the improvement in the early pulmonary rehabilitation were better than the late and the not rehabilitation group. (3) Prevalence of anxiety and depression were not changed significantly pre-post or between groups, except the pre-post rehabilitation in the early. Conclusion: Early and late pulmonary rehabilitation, as well as the usual discharge with the exacerbation, are effective treatment in terms of improving anxiety, depression, dyspnea and exercise capacity in COPD patients with exacerbation. And the early pulmonary rehabilitation provides the most benefits.