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Title: Prevalence of respiratory symptoms and airflow limitation in a nationally representative random sample in England

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Body: Introduction Chronic Obstructive Pulmonary Disease (COPD) causes 23,000 deaths p.a. in England with direct health costs of over £1bn. 835,000 people are registered on general practice (GP) COPD registers. An estimated 2.7 million are undiagnosed. Poor symptom recognition by the public and clinicians contributes to late diagnosis. Aims To estimate the prevalence of respiratory symptoms and airflow obstruction in the population of England. Methods The annual Health Survey of England is a cross-sectional study of a random, nationally representative sample of 8,000 adults. It includes detailed interviews and objective measures by nurses. The 2010 survey focused on lung disease and included spirometry (without bronchodilator). Results 15% of men and 23% of women aged 16+ had MRC dyspnoea score 2-5: half of these scored 3-5. 4% of men and 5% of women had ever been told by a doctor that they had chronic bronchitis, emphysema or COPD, compared with GP register prevalence of 1.6%. Measured FEV1 and FEV1/FVC ratio were inversely associated with income. FEV1/FVC was below 5th centile (indicating probable airflow limitation) in 8% of men and women: only a quarter of these had been told by a doctor that they had chronic bronchitis, emphysema, or COPD. Conclusions This large population survey confirms that substantial numbers of people have significant respiratory symptoms and probable undiagnosed airflow obstruction. Failure to diagnose COPD early matters because it adversely affects outcomes and quality of life. To tackle this, a national Outcomes Strategy for COPD and Asthma has been launched to promote lung health awareness, earlier diagnosis and proactive disease management.