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**Title:** Do physically active and not physically active adult subjects with bronchiectasis have different clinical and functional characteristics?

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**Body:** Introduction: There is growing interest in assessing physical activity in daily life (PADL) in chronic lung diseases. However, PADL has never been studied in adult subjects with non-cystic fibrosis bronchiectasis (nCF-BCt). Aim: To compare the functional and clinical characteristics between physically active (PA, ≥ 7,500 steps/day) and not physically active (nPA, < 7,500 steps/day) subjects with nCF-BCt. Methods: Eighty subjects (50 women) were evaluated. PADL was assessed according to number of steps taken, calculated over three consecutive days (Yamax, PW-610 model, Tokyo, Japan). The subjects underwent spirometry, an incremental shuttle walk test (ISWT), bioelectrical impedance (fat-free mass index, FFMi), and cardiopulmonary exercise testing. Dyspnea was determined using the Medical Research Council (MRC) scale, and health-related quality of life (HRQoL) using St. George's Respiratory Questionnaire (SGRQ). Results are shown in Table 1.

Table 1: Comparison between the PA and nPA characteristics

	PA (n=49)	nPA (n=31)
PADL (steps/day)*	12863 ± 4959	4252 ± 1901
Age (yrs)	43 ± 15	46 ± 14
BMI (kg/m2)	24.9 ± 5.8	25.1 ± 5.7

FFM (kg/m2)*	16.7 ± 1.9	16.6 ± 1.9
MRC*	2.1 ± 1.0	3.5 ± 1.4
ISWT (m)*	514 ± 152	378 ± 130
Peak workload (%pred)*	72 ± 19	52 ± 24
Peak VO2 (%pred)*	64.0 ± 13.6	59.5 ± 9.5
SGRQ symptoms*	50 ± 22	75 ± 67
SGRQ impact*	43 ± 23	55 ± 25
SGRQ activity*	56 ± 25	73 ± 20
SGRQ total score*	48 ± 19	64 ± 20

<sup>\*</sup> p<0.05

Conclusion: nPA subjects with nCF-BCt have higher dyspnea levels and worse pulmonary function, functional capacity, and HRQoL than PA subjects do.