

European Respiratory Society Annual Congress 2013

Abstract Number: 5503

Publication Number: P4223

Abstract Group: 6.1. Epidemiology

Keyword 1: COPD - exacerbations **Keyword 2:** Epidemiology **Keyword 3:** No keyword

Title: Influence of the seasons on exacerbation characteristics in a cohort of COPD patients (EXACO study)

Dr. Alexis 29611 Cortot alexis-cortot@chru-lille.fr MD ¹, Prof. Dr Isabelle 29612 Tillie-Leblond itillieleblond@hotmail.fr MD ¹, Dr. Frédéric 29613 Masure fredmasure@gmail.com MD ², Prof. Dr Nicolas 29614 Roche nicolas.roche@htd.aphp.fr MD ³, Dr. Thierry 29615 Perez thierry.perez@chru-lille.fr MD ¹, Dr. Isabelle 29665 Boucot isabelle.i.boucot@gsk.com MD ⁴, Dr. François 29675 Denis francois.denis@boehringer-ingelheim.com MD ⁵, Dr. Aida 29685 Myftiu aida.myftiu@takeda.com MD ⁶, Dr. Juliette 29703 Ostinelli juliette.ostinelli@astrazeneca.com MD ⁷, Dr. Hélène 29780 Schluep helene.schluep@pfizer.com MD ⁸, Ms. Céline 29786 Pribil celine.c.pribil@gsk.com ⁴, Dr. Stéphane 29788 Schück stephane.schuck@kappasante.com MD ⁹, Ms. Anne 29801 Lallemand anne.lallemand@kappasante.com ⁹ and Prof. Dr Bruno 29815 Housset bruno.housset@gmail.com MD ¹⁰. ¹ Respiratory Medicine, CHRU Calmette, Paris, France ; ² Respiratory Medicine, Groupe Médical Saint Rémi, Reims, France ; ³ Respiratory Medicine, CHU Hôtel-Dieu, Paris, France ; ⁴ Medical Department, GlaxoSmithKline, Marly Le Roi, France ; ⁵ Medical Department, Boehringer Ingelheim, Paris, France ; ⁶ Medical Department, Takeda, Paris, France ; ⁷ Medical Department, AstraZeneca, Rueil-Malmaison, France ; ⁸ Medical Department, Pfizer, Paris, France ; ⁹ Scientific Department, Kappa Santé, Paris, France and ¹⁰ Respiratory Medicine, CHU, Créteil, France .

Body: Background: COPD patients experience more frequent exacerbations in the winter. Objectives: To assess the impact of the seasons on exacerbation characteristics in patients with COPD. Methods: In this French prospective observational study, respiratory physicians (n=132) included 835 COPD patients followed over 4 years. Sociodemographic data, clinical history, symptoms, lung function data and treatments were initially recorded. COPD clinical features, pulmonary function tests, treatments and the onset of exacerbations were recorded by the investigators during follow-up visits. Patients also completed exacerbation diaries. Exacerbation was identified as ≥ 2 consecutive days with a sustained worsening of the patient's symptoms beyond day-to-day variations. Exacerbation characteristics were compared within groups based on the season of onset. This analysis was conducted in 681 patients with exacerbation-related data. Results: Out of 4132 exacerbations, 1354 (33%) exacerbations occurred during winter (December to February) compared to 792 (19%) in summer (June to August), 980 (24%) in spring and 1006 (24%) in autumn. Mild exacerbations were more frequent in summer (17%, 19% and 18% in winter, spring and autumn respectively vs 24% in summer, $P < 0.001$). The proportion of exacerbations meeting the Anthonisen criteria was higher outside the summer months (30%, 31% and 29% in winter, spring and autumn vs 23% in summer, $P < 0.001$). Exacerbations in which dyspnea was the only symptom reported were more frequent in summer (5%, 7% and 7% in winter, spring and autumn vs 12% in summer, $P < 0.0001$). Conclusions:

Exacerbations appear to be less frequent and less severe with a specific clinical pattern in summer.