European Respiratory Society Annual Congress 2013

Abstract Number: 2886

Publication Number: P2138

Abstract Group: 1.1. Clinical Problems

Keyword 1: COPD - exacerbations Keyword 2: Elderly Keyword 3: COPD - mechanism

Title: Clinical profile and treatment of elderly patients hospitalized for acute exacerbation of chronic obstructive pulmonary disease. A comparative syudy

Dr. Hajer 15174 Benabdelghaffar benabdelghaffar10@yahoo.fr MD , Dr. Othmen 15175 Neffati benabdelghaffar10@yahoo.fr , Prof. Soraya 15176 Fenniche benabdelghaffar10@yahoo.fr , Dr. Ines 15177 Akrout benabdelghaffar10@yahoo.fr , Dr. Dorra 15178 Greb benabdelghaffar10@yahoo.fr , Prof. Leila 15179 Fekih benabdelghaffar10@yahoo.fr , Dr. Hela 15180 Hassene benabdelghaffar10@yahoo.fr , Dr. Tawadoud 15181 Khmiss benabdelghaffar10@yahoo.fr , Dr. Dalinda 15182 Belhabib benabdelghaffar10@yahoo.fr and Prof. Mohamed Lamine 15183 Megdiche benabdelghaffar10@yahoo.fr . ¹ Ibn Nafiss, Abderrahmen Mami Hospital, Ariana, Tunisia, 2080 ; ² Ibn Nafiss, Abderahmen Mami Hospital, Ariana, Tunisia and ³ Ibn Nafiss, Abderrahmen Mami Hospital, Ariana, Tunisia .

Body: Hospitalizations for chronic obstructive pulmonary disease (COPD) occur mostly in elderly patients. We describe the characteristics of elderly patients hospitalized for exacerbation of COPD in a pulmonary service, compared with the younger age group. The aim was to examine if the advanced age increases the frequency, duration and severity of ECOPD. Patients with COPD were prospectively enrolled and followed between January 2007 and December 2012. Patients were divided in two groups; A total of 100 patients were recruited among them 50 were more than 70 years. We compared the differences between the 2 groups and the rest regarding comorbidity, severity of COPD, previous admissions, length of stay and treatment prescribed. Comorbidity was assessed by the Charlson index. The elderly patients had more severe COPD (P =0.02) and had a lower body mass index (P =0.05), elderly patients had greater presence of arrhythmias and left ventricular hypertrophy (P = 0.01) and received more diuretics (P< 0.05). Dyspnoea, and length of stay were most important in elderly patients with a significant difference. Home oxygen therapy was lower in younger patients. The mean exacerbation of COPD frequency was 2 in older group versus 0.7 in the younger group (P < 0.001). Mean duration of each exacerbation was 8 days in older group versus 5, 5 days in younger patients. Acute respiratory failure was more frequent in older patients than younger with significant difference. Serum C-reactive protein (r = 0.36, P = 0.001), fasting blood glucose (r = 0.6, P= 0.001) were positively and significantly correlated with advanced age and with exacerbation frequency.