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**Title:** The prevalence of COPD in patients participated in rehabilitation program after myocardial infarction

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**Body:** INTRODUCTION: Chronic obstructive pulmonary disease (COPD) and myocardial infarction (MI) share common risk factors and pathophysiological determinants. AIM: The aim of our study was to find the prevalence of COPD in MI patients (pts) because this prevalence is not well known. METHODS: We reviewed the entire medical records of 199 pts with coronary disease (CD) who participated in cardiac rehab program in Institute for rehabilitation, Belgrade, from January to April 2011. We have analyzed 155 pts with MI. The others (44) underwent coronary bypass surgery. RESULTS: The diagnosis of COPD was confirmed on clinical and spirometry findings in 22 pts (14,19%) with MI; 18 men and 4 women; mean age 63,04±9,35 years; 8 smokers and 14 ex-smokers; FEV1 = 74,97± 21,75%pred (range from 35,7 to 118, median= 75,6), FEV1/FVC= 61± 8,38% (range from 40,27 to 69,18, median=64,5). COPD was newly diagnosed in 16 (72,7%) MI pts. Compared to pts without COPD, those with COPD were not different in the age and the prevalence of ascertain cardiovascular risk factors (hypertension, diabetes and hyperlipidemia) (p>0,05). CONCLUSION: According to our results, COPD is frequent in MI patients. COPD was newly diagnosed in the majority of patients. The spirometry should be performed in smokers with MI because the prognosis of MI is worse when chronic airway disease is not diagnosed and pts do not receive optimal COPD treatment. Bursi F, Vassallo R, Weston SA, et al. Chronic obstructive pulmonary disease after myocardial infarction in the community. Am Heart J 2010;160(1):95-101.