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Title: Evaluation of multiple admissions of COPD patients: European COPD audit

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Body: Background. Patients with multiple admissions represent an especially at risk population with therapeutic and prognostic implications. The European COPD Audit is a clinical audit to evaluate clinical practice variability, clinical and organisational factors related to outcomes for COPD admissions across Europe (422 hospitals from 13 European countries). The present communication aimed at evaluating multiple admission patients and their clinical features and outcomes. Methods. The study comprised a first 8-week phase during which all consecutive cases admitted to hospital due to an exacerbation of COPD were identified and information on clinical practice and outcomes was gathered. During the 90-day follow-up second phase mortality and readmissions were sought. Multivariate odds ratios (OR) were calculated to evaluate factors associated with multiple admissions. Results. Data on 14,456 cases are reported, of which 6,821 (47.2%) were the first admission (countries range 29.3-74.5%). Patients characteristics associated with multiple previous admissions were: current smoker (OR 0.69), FEV₁ value (OR 0.99), and PO₂ value (OR 1.003). Health care proved to multiple admission patients was different in terms of chest x-ray not done (OR 2.03), methylxanthines use (OR 1.2), antibiotic use (OR 0.78), diuretics use (OR 1.16) and use of NIV (OR 1.11). Reports at discharge tended to have a higher use of theophylline (OR 1.23), oxygen (OR 1.8) and mechanical ventilation (OR 1.5). We also found an impact on readmission rate (OR 0.4). Conclusions. Multiple admission patients represent a different type of COPD patient admitted to hospital, with a more severe disease requiring more resources.