Prognostic factors in COPD patients controlled in two outpatient clinics

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Body: FEV1 and a number of composite indexes (BODE, U-BODE, ADO) predict mortality in the population of patients with chronic obstructive pulmonary disease (COPD) at large. However, patients attending the specialized clinics of tertiary referral hospitals are often old and suffer severe or very severe airflow limitation. We aimed to compare the prognostic value of FEV1, BODE, U-BODE and ADO indexes in patients attending the outpatient clinics of Hospital de Cruces, a tertiary referral hospital in Bilbao (Spain). Patients from two outpatient clinics were included. FEV1, BODE, U-BODE and ADO values were determined at recruitment and patients were followed up for a mean of 4.5 years. We studied 106 patients (70.5±8.9 yrs.; FEV1 44.4±9.9 % of ref.), 35 of whom (33%) died during follow-up. In this population, FEV1 did not predict mortality, whereas BODE (p=0.001), U-BODE (p=0.000) and ADO indexes (p=0.003) did. BMI did not discriminate survival significantly but dyspnea (p=0.003), distance walked (p=0.000) and age (p=0.02) did. In patients attending the outpatient clinic of a tertiary referral hospital, FEV1 is not a good prognostic marker, at variance to age, dyspnea, walked distance, ADO, BODE and U-BODE indexes.