Title: Comparison of quality of life scores with modified Medical Research Council (mMRC) dyspnoea scale using data from the European health-related quality of life study

Paul 15872 Jones pjones@sgul.ac.uk MD ¹, Lukasz 15873 Adamek lukasz.p.adamek@gsk.com ², Gilbert 15874 Nadeau gilbert.a.nadeau@gsk.com ² and Norbert 15875 Banik norbert.n.banik@gsk.com ³. ¹ Clinical Science, St. George’s University, London, United Kingdom; ² Respiratory Centre of Excellence, GlaxoSmithKline, Uxbridge, United Kingdom and ³ Biostatistics and Epidemiology, GlaxoSmithKline, Munich, Germany.

Body: The 2011 Global Initiative for chronic obstructive lung disease (GOLD) guidelines recommend a combined assessment for measuring the impact of COPD which considers current symptoms and future exacerbation risk. Two symptom cut-points are proposed using the COPD Assessment Test (CAT) score ≥10 and modified Medical Research Council (mMRC) dyspnoea score ≥2. There are currently no published data comparing CAT scores by different mMRC grades. This analysis examined health status scores for CAT, St George’s Respiratory Questionnaire (SGRQ) and short form health survey (SF-12) Physical Component (PC) split by mMRC grade in a primary care population using data from the Health-Related Quality of Life in European COPD Study. Data from 1817 patients (mean [SD] FEV₁ 1.6 [0.6] L; age 64.9 [9.6] years; males 72%) were used. The CAT, SGRQ and SF-12 PC scores are tabulated.

The mMRC showed a clear relationship with scores from the comprehensive generic and disease-specific measures. mMRC Grade 1 was associated with very significant levels of health status impairment. Even the patients with mMRC Grade 0 had modestly elevated CAT and SGRQ scores, which means that mMRC Grade 0 does not mean the absence of symptoms.