European Respiratory Society
Annual Congress 2012

Abstract Number: 4999

Publication Number: P3967

Abstract Group: 6.1. Epidemiology

Keyword 1: Chronic disease **Keyword 2:** Public health **Keyword 3:** Quality of life

Title: Chronic obstructive pulmonary disease surveillance: Potential usefulness of the Texas behavioral risk factor survey surveillance system

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Body: Background: Public health surveillance of COPD has traditionally focused on risk factors and measures of disease occurrence, but these measures are insufficient to monitor effectiveness of disease control strategies. Objectives: The purpose of this analysis was to evaluate the potential usefulness of a population-based telephone surveillance system for monitoring patient-reported outcomes among patients with COPD. Methods: The Behavioral Risk Factor Surveillance System (BRFSS) is a state-based system of telephone surveys. In 2009, the Texas BRFSS included a question about physician-diagnosed COPD and self-rated health status. We conducted a cross-sectional analysis of self-reported COPD, fair/poor health status, and the influence of lifestyle factors, health care access, and co-morbid conditions. Adjusted prevalence ratios (PR) were calculated using multivariate logistic regression. Results: Adults with COPD reported significantly worse health status compared to adults without COPD (fair/poor: 49.1% vs. 13.7%, $p<0.001$). In multivariate analyses lifestyle and health care access factors significantly ($p<0.05$) associated with fair/poor health status included: current smoker (PR=2.9), former smoker (PR=2.0), physical inactivity (PR=3.0), having a personal doctor (PR=4.8), inability to see a doctor due to costs (PR=3.6), and pneumonia shot (PR=6.1). Co-morbid conditions significantly ($p<0.05$) associated with fair/poor health status were: obesity (PR=3.5), asthma (PR=1.7), cardiovascular disease (PR=3.2), and cancer (PR=1.7). Conclusion: These results suggest that the BRFSS may be useful at the population-level for surveillance of COPD.