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Title: Home exercise tolerance assessment in acute exacerbated COPD patients

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Body: Introduction: Home Hospitalization (HH) is an effective intervention for severe acute exacerbation of COPD (AECOPD). Exercise training after AECOPD treated at HH can be useful to improve functional capacity and quality of life in those patients. Nevertheless, to assess exercise tolerance at home is complex. The modified Glittre ADL-Test is a measure of functional status that we have adapted to patient's home. Objective: Analyze the modified Glittre ADL-Test as a tool to measure exercise tolerance during an AECOPD at HH. Method: 17 AECOPD patients, 15 males (median (ICR): 66 (60-84) years, FEV₁ 38% (29-44) predicted) attended at HH accepted to participate and completed 3 visits (V₁: HH discharge, V₂: 10 days post discharge, V₃: 1 month post discharge). Outcomes: 1) Modified Glittre ADL-Test: laps (n), VO₂ and VE; 2) COPD Assessment Test; 3) MMRC and London Chest Activities of Daily Living (LCADL); 4) Modified Baecke (V₁ and V₃); 5) Handgrip. Results: Modified Glittre ADL-Test laps increased (4 vs 5 vs 5, p<0.005), VO₂ per lap (242 vs 229 vs 177 mL/min, p<0.03) and VE per lap decreased (7 vs 7 vs 5 L/min, p<0.01). CAT (18.5 vs 11.5 vs 12, p<0.01), MMRC (2 vs 1.5 vs 1, p<0.01) and Modified Baecke (4 vs 14, p<0.01) also significantly improved between each assessment. There were no differences in Handgrip or LCADL.

Conclusion: Modified Glittre ADL-Test was suitable to measure exercise tolerance following an AECOPD attended at patient's home.