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Title: COPD and comorbidity in somatic practice

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Body: The aim of our study was to determine the clinical features of comorbidity in patients with COPD and other somatic pathology. Based on the evidence of postmortem autopsies, we planned to explore the frequency of occurrence and the structure of comorbidity. We analyzed the 3469 deaths cases of patients admitted to hospital due to decompensation of somatic pathology. Comorbidity was found in 2751 (79,3%) cases (1035 men (37,6%) and 1716 women (62,4%)). The average age of patients with comorbidity was 72,6 years old (by men - 69,4 and by women - 76,1). We found that the greatest number of nosological units (5,9 diseases per person) occurs in elderly patients (80-89 years). Combination of the two diseases occur in 17,5% of patients with comorbidity, three diseases - in 34,9%, four diseases - in 26,9%, the five diseases - in 14,7% and more than 5 disease - in 6% of patients with somatic pathology. For example, chronic obstructive pulmonary disease in 57,5% of cases combined with arterial hypertension, in 74,6% of cases - with coronary heart disease, in 97,3% of cases - with chronic cerebrovascular disease, in 63,5% of cases - with the pathology urogenital system, in 22,1% of cases - with diabetes mellitus type 2. Comorbidity in patients with COPD in 18% of the cases makes it difficult identify malignant tumor, in 13,5% - intracerebral hemorrhage, in 13% - acute myocardial infarction, in 8,3% - chronic cerebrovascular disease, in 7,6% - ischemic heart disease, in 6,8% - stroke, in 5,2% - aortic dissection and in 4,8% of cases - mesenteric thrombosis. Comorbidity alters the clinical picture and course of underlying disease (ex. COPD), the nature and severity of its complications and degrades the quality of life of patients.