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Title: Distribution of COPD patients in the GOLD assessment framework by exacerbations

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Body: GOLD 2011 proposes a new COPD assessment framework focussed on symptoms measured by the COPD Assessment Test (CAT™) or the mMRC and on risk based on poor lung function (FEV₁<50%) and a history of ≥2 exacerbations in the previous year. This analysis focusses on exacerbations. The 2011 Adelphi Disease Specific Programme dataset was used to understand the distribution of patients in the GOLD framework. Exacerbation events defined as those not brought under control by rescue medication were recorded by physicians. We included 1041 EU COPD patients with documented CAT, mMRC, FEV₁ and exacerbation history in the last year: 401 (38.5%) were from primary care and 640 (61.5%) from specialty clinics. Almost all (97.7%) were on maintenance treatment. 104 subjects (10%) reported good health status (CAT<10); only 7 of these were repeat exacerbators or had poor lung function. ½ of all patients (48.6%) had no exacerbations and 18.5% had 1 exacerbation in the previous year.

% Distribution based on Exacerbation History - (n)

GOLD Quadrant		Exacerbation History		
	0	1	≥2	
A	8.0% (83)	1.3% (14)	0% (0)	
В	35.4% (368)	13.2% (137)	0% (0)	
С	0.3% (3)	0.1% (1)	0.3% (3)	
D	5.0% (52)	3.9% (41)	32.5% (339)	
Total	48.6% (506)	18.5% (193)	32.9% (342)	

In observational databases, 1 exacerbation increases the risk of future exacerbations¹ and negatively impacts health status and outcomes². Therapeutic interventions reduce the number and severity of exacerbations in patients with 1 or more exacerbations. Nearly 1/5 of patients in the Adelphi dataset had 1 exacerbation in the previous year and would fail to be included in GOLD high risk category. These observations may have important clinical implications. 1. Hurst JR, NEJM 2010 2. Cote C, CHEST 2007.