

European Respiratory Society Annual Congress 2013

Abstract Number: 3354

Publication Number: P1266

Abstract Group: 9.1. Respiratory Function Technologists/Scientists

Keyword 1: Monitoring **Keyword 2:** Experimental approaches **Keyword 3:** E-health

Title: Classification of clinical spirometry data using global lung initiative (GLI) and national health and nutrition examination survey (NHANES-III) models

Dr. Olinto 20294 Linares-Perdomo olinto.linares@imail.org¹, Dr. Dave 20295 Collingridge David.Collingridge@imail.org², Dr. Stacy 20296 Bamberg sjm.bamberg@me.com³, Dr. Denitza 20297 Blagev Denitza.Blagev@imail.org MD⁴, Mr. Steven 20298 Howe Steve.Howe@imail.org⁵, Dr. Robert 20308 Jensen Robert.Jensen@imail.org⁴, Dr. John 20314 Hankinson john@hankconsulting.com⁶ and Dr. Alan 20338 Morris alan.morris@imail.org MD⁴. ¹ Pulmonary/Critical Care Division, Intermountaine Medical Center, Murray, UT, United States, 84157-7000 ; ² Office of Research-Utah, Intermountain Healthcare, Murray, UT, United States, 84157-7000 ; ³ Department of Mechanical Engineering, University of Utah, Salt Lake City, UT, United States, 84102 ; ⁴ Pulmonary/Critical Care Division, Departments of Internal Medicine, Intermountain Medical Center, Murray, UT, United States, 84157-7000 ; ⁵ Department of Medical Informatics, Intermountain Healthcare, Murray, UT, United States, 84157-7000 and ⁶ Hankinson Consulting, Hankinson Consulting, Athens, GA, United States .

Body: RATIONALE: Pulmonary Function Testing is central to distinguishing normal from abnormal patients in Cardiac, Pulmonary, and other branches of Medicine. The National Health and Nutrition Examination Survey-III (NHANES-III) equations provide predicted normal values (Pred) and lower limits of normal (LLN) from 8 to 80 years of age. The recent Global Lung Initiative (GLI-12) equations provide values from 3 to 95 years of age. We compare clinical data classification using the NHANESIII and GLI prediction equations. METHODS: We used clinical data from Intermountain Medical Center and LDS Hospital patients (Salt Lake City, Utah) from 2001-2012. We analyzed data from 10-80 year old Caucasian patients. We used the NHANESIII and the GLI-12 prediction equations to calculate the Pred and LLN for FEV1, FVC, and FEV1/FVC. We compared categorizations using both approaches. RESULTS: We studied 17,107 spiromograms from Caucasian patients (8,143 males, mean age 54.5, SD 16.1 and 8,964 females, mean 54.4, SD 15.5). Pred and LLN values were similar for both NHANES-III and GLI-12, but differences existed. These differences appear gender and height dependent. We observed small differences in normal/abnormal patient categorizations for FEV1, FVC, and FEV1/FVC when comparing NHANES-III and GLI-12 equations. CONCLUSION: We observed small differences between NHANES-III and GLI-12 categorization for both men and women. Differences are greatest for FVC. The GLI-12 equations categorize more PFT laboratory patients as normal than those for NHANESIII.