

HOW CAN I IDENTIFY PATIENTS MOST AT RISK?

Exacerbations are frequently under-reported by patients and can therefore be undertreated¹. There are common risk factors that can help identify patients at risk of an exacerbation, including:



SYMPTOM BURDEN

Patients with the highest symptom burden (i.e. those in the worst SGRQ quartile, a SGRQ score ≥ 60) have a 40% increase in risk of exacerbation



LUNG FUNCTION

Poor lung function (i.e. FEV1) is associated with a greater risk of exacerbations. Patients with a higher FEV1 (GOLD Stage 1) may lose more lung function following an exacerbation than patients with more severe COPD³



COMORBIDITIES

Patients with comorbidities such as lung cancer, heart failure, dyspepsia and asthma are at greater risk of experiencing frequent exacerbations⁴



PREVIOUS EXACERBATIONS

A history of exacerbations is the strongest predictor of future exacerbation risk. The risk of re-hospitalization or death also increases substantially after a first severe COPD exacerbation, and with each subsequent event^{2,5}



Raised eosinophilic count

In patients with a history of exacerbations, a higher blood eosinophil count predicts an increased risk of future exacerbations⁶

SGRQ: St George's Respiratory Questionnaire.

REFERENCES

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