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# The ABCD assessment tool in COPD patients with GOLD 2017 and GOLD 2016 guidelines.

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## BACKGROUND

Prognostic indexes such as ADO, BODEx and DOSE, could facilitate COPD risk stratification and clinical decision making. To undertake a comparative analysis among them, in the same patients and with common recruitment criteria, a European cohort in primary care (PROEPOC/COPD study) was initiated in 2015 with five years follow-up planned.

## RESEARCH QUESTIONS

Following the ABCD assessment tool of COPD from GOLD guidelines 2016 and 2017, are there differences in patients classification?

## METHOD

**Design:** Open and prospective cohort study in primary care.

**Setting:** 36 health centres in 6 European high, medium and low income countries.

**Subjects:** First 300 patients from PROEPC/COPD study, captured in clinical visit by their General Practitioner/Nurse. 477 expected at the end of recruitment.

**Variables:** Detailed patient history, exacerbations, lung function test and questionnaires (mMRC, CAT) at baseline.

**Analysis:** Descriptive analysis and bivariate analysis for the combined assessment of each GOLD version.

## RESULTS

ABCD assessment tool based on the CAT score produced a higher pattern than the assessment based on mMRC score (GOLD 2017). The estimated proportion in GOLD 2 is 28.70 (95%CI: 23.08+35.07), in GOLD 3 is 33.33 (95%CI: 22.95-45.63) and in GOLD 4 is 62.50 (95%CI: 38.64-81.52). Assessment based on exacerbations produced a higher pattern than the assessment based on FEV 1 (GOLD 2016).

## CONCLUSIONS

Combined GOLD assessment is confusing for COPD patients' classification and their therapeutic management in a primary care cohort. It is an on-going study. In the future, it will be possible to know mortality/morbidity prognosis with the different formulas.

## POINTS FOR DISCUSSION

Is spirometry available in primary care?

Is the GOLD classification used in your practice?

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