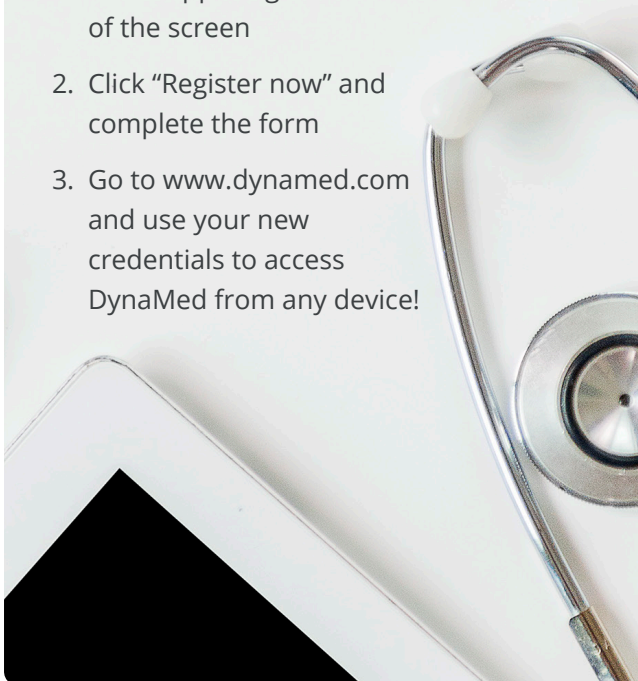


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## Fast, Evidence-Based Answers to Clinical Questions



# Features and Functionality at a Glance...

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**COPD** 7 1

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Overview and Recommendations

Background

- Chronic obstructive pulmonary disease (COPD) is characterized by significant airflow limitation associated with a chronic inflammatory response in the airways and lungs resulting in the destruction of lung tissue.
  - It commonly affects adults > 40 years old who smoke, with an estimated worldwide prevalence of 4%-10%.
  - The disease course is usually progressive with a long-term decline in lung function and is the third leading cause of mortality worldwide.
  - It is a preventable and treatable disease commonly associated with co-morbidities (such as cardiovascular disease) and significant systemic consequences (such as skeletal muscle dysfunction).
- Smoking is the most common risk factor for COPD worldwide; other risk factors include occupational exposures (for example, organic and inorganic dusts, chemical agents, and fumes), alpha-1 antitrypsin deficiency, and indoor air pollution (particularly from biomass smoke caused from burning biomass fuels in confined spaces).
- COPD has several complications, including acute exacerbation, respiratory failure, and pulmonary hypertension.
- 4-year mortality rates range from 28% for mild-to-moderate COPD to 62% for moderate-to-severe COPD.

Evaluation

- Suspect a diagnosis of chronic obstructive pulmonary disease (COPD) in patients with chronic and progressive dyspnea, cough, and/or sputum production, who have a smoking history, or have been exposed to other risk factors.
- Recognize that a physical examination has a limited utility for diagnosing COPD.
  - Findings consistent with COPD include the use of accessory respiratory muscles

4

TOPIC EDITOR  
Linda Nici MD

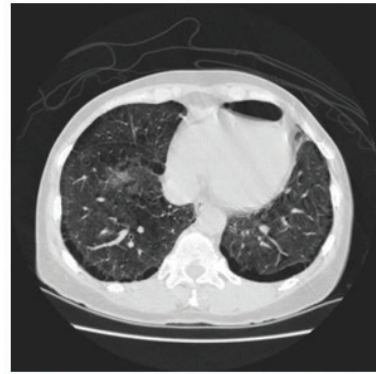
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COPD chest CT

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