

COPD: ein Patientenpfad

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COPD: ein Patientenpfad



Paul, geboren 1962



Eltern Raucher



Häufige Infekte in der Kindheit



“Asthma bronchiale” in der Jugend





Paul fängt mit 16 an zu Rauchen



“Asthma bronchiale” in der Jugend



Paul beginnt eine Schweißerlehre





**Chronischer Husten
Kurzatmigkeit beim Wandern**



Diagnose COPD mit 53 Jahren



Paul hört mit dem Rauchen auf





Paul, geboren 1962



**Kurzatmigkeit, Krankenstandstage,
Exazerbationen, Spitalsaufenthalte**



Verlust von 60% LUFU in 10 Jahren

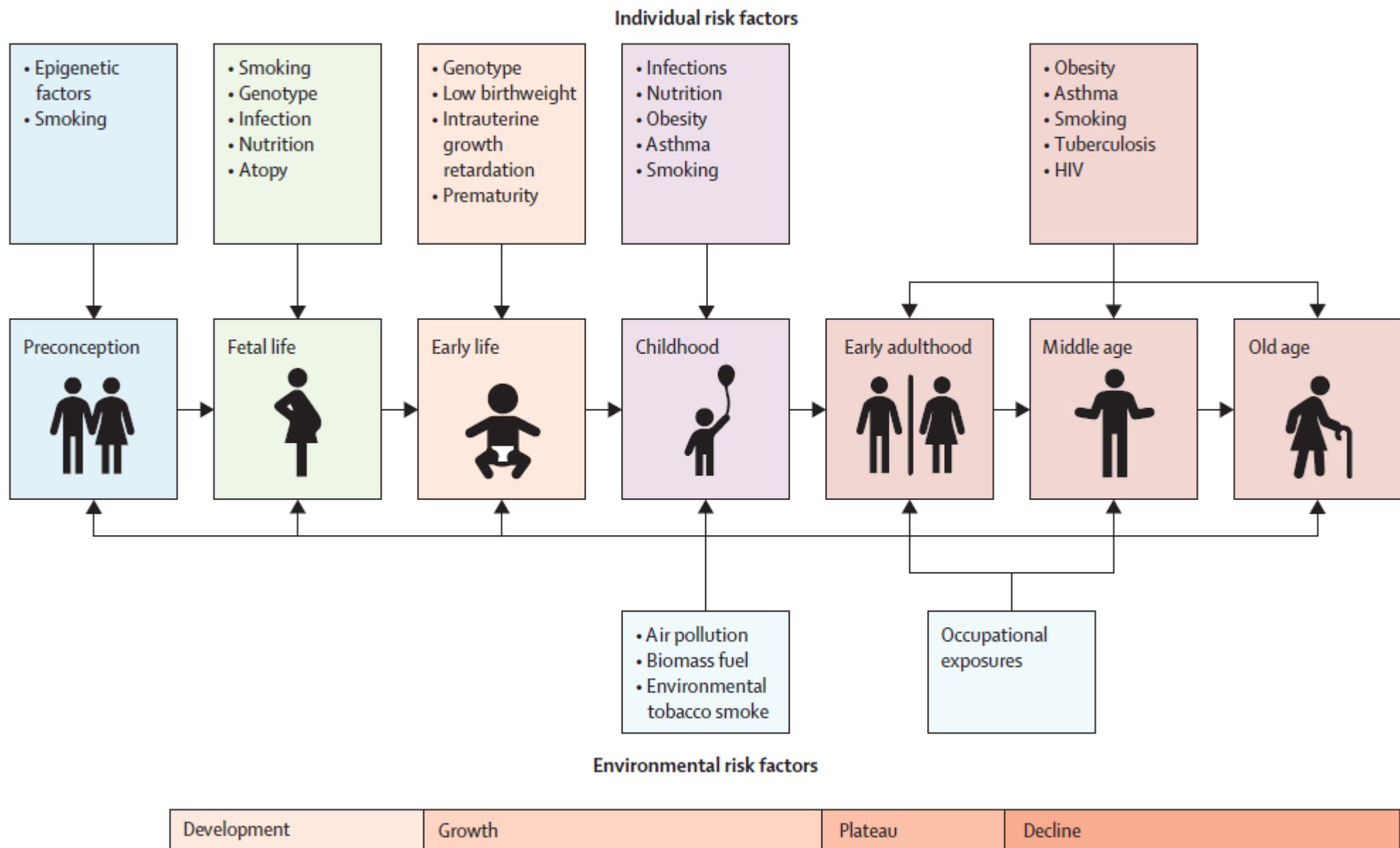


Kardiovaskuläre Komorbiditäten



**Paul verstirbt 2023 im Rahmen einer
Pneumokokken-Pneumonie**



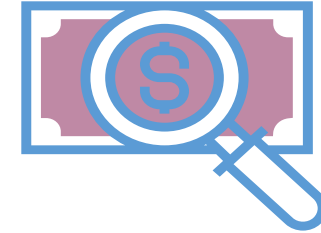


COPD

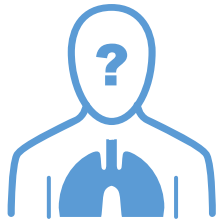
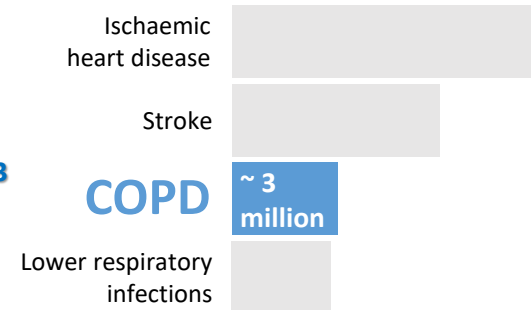
~384 Mio Menschen weltweit betroffen¹



100 Mrd.\$ Krankheitskosten jährlich per ^{1,3-5}



COPD = 3. häufigste
Todesursache weltweit¹³



Etwa die Hälfte der COPD Patient*innen sind nicht diagnostiziert²



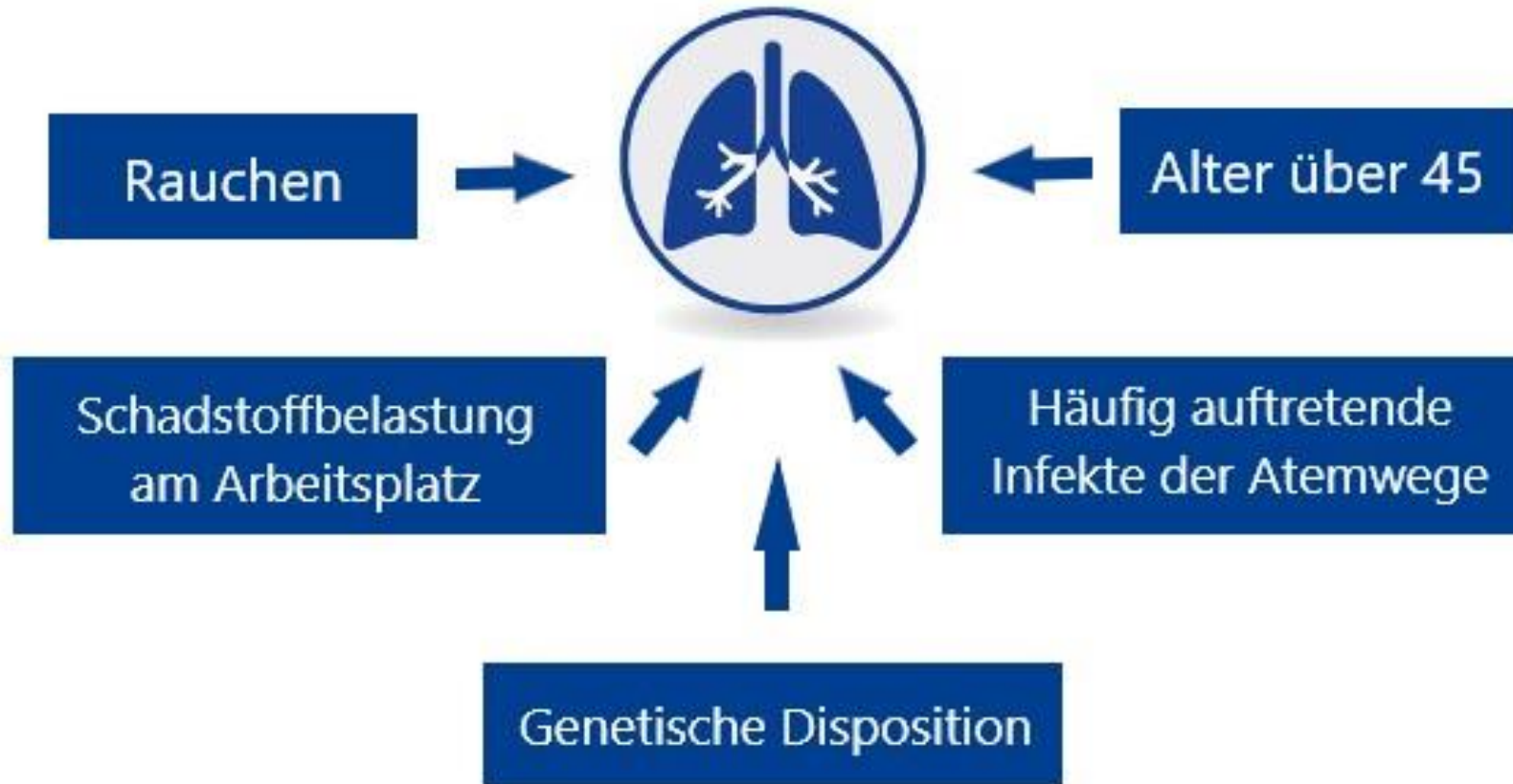
COPD Exazerbationen als Hauptfaktor für Morbidität und Mortalität^{1,6-12,a}

^a50-75% for services associated with exacerbations.⁸ 1. GOLD. Global strategy for the diagnosis, management, and prevention of COPD: 2020 report; 2. Diab N et al. *Am J Respir Crit Care Med* 2018;198:1130-1139; 3. Ford ES et al. *Chest*. 2015;147:31-45; 4. Chen X et al. *Int J COPD*. 2016;11:2625-2632; 5. Nishimura S et al. *Respirology*. 2004;9:466-473; 6. Qureshi H et al. *Ther Adv Chronic Dis*. 2014;5:212-227; 7. Press VG et al. *Curr Opin Pulm Med*. 2018;24:138-146; 8. Celli BR et al. *Eur Respir J*. 2004;23:932-946; 9. Toy EL et al. *COPD*. 2010;7:214-228; 10. Anzueto A. *Eur Respir Rev*. 2010;19:113-118; 11. Geitona M et al. *Respir Med*. 2011;105:402-409; 12. Perera PN et al. *COPD*. 2012;9:131-141;

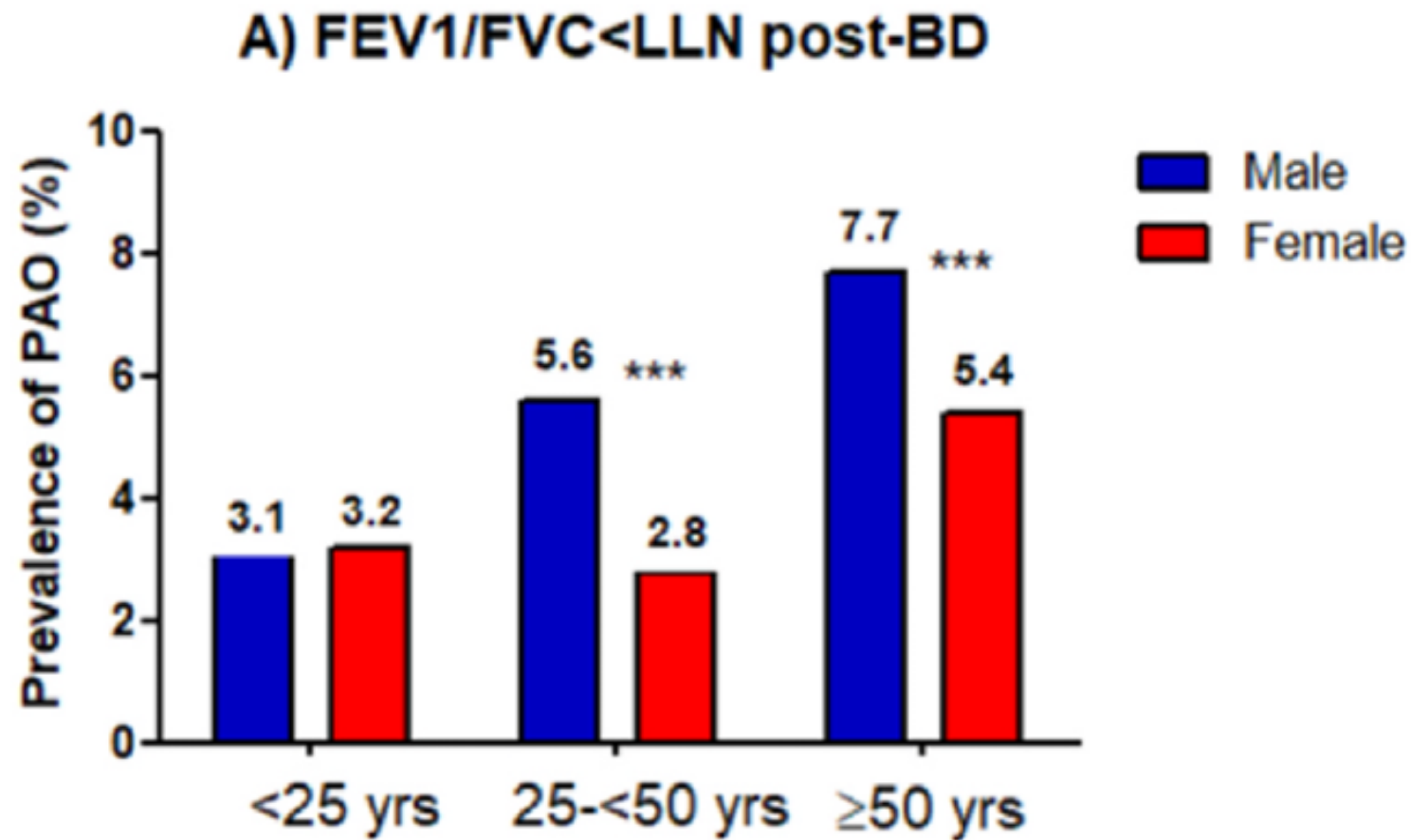
13. World Health Organization. The top 10 causes of death. <https://www.who.int/news-room/fact-sheets/detail/the-top-10-causes-of-death>

COPD:

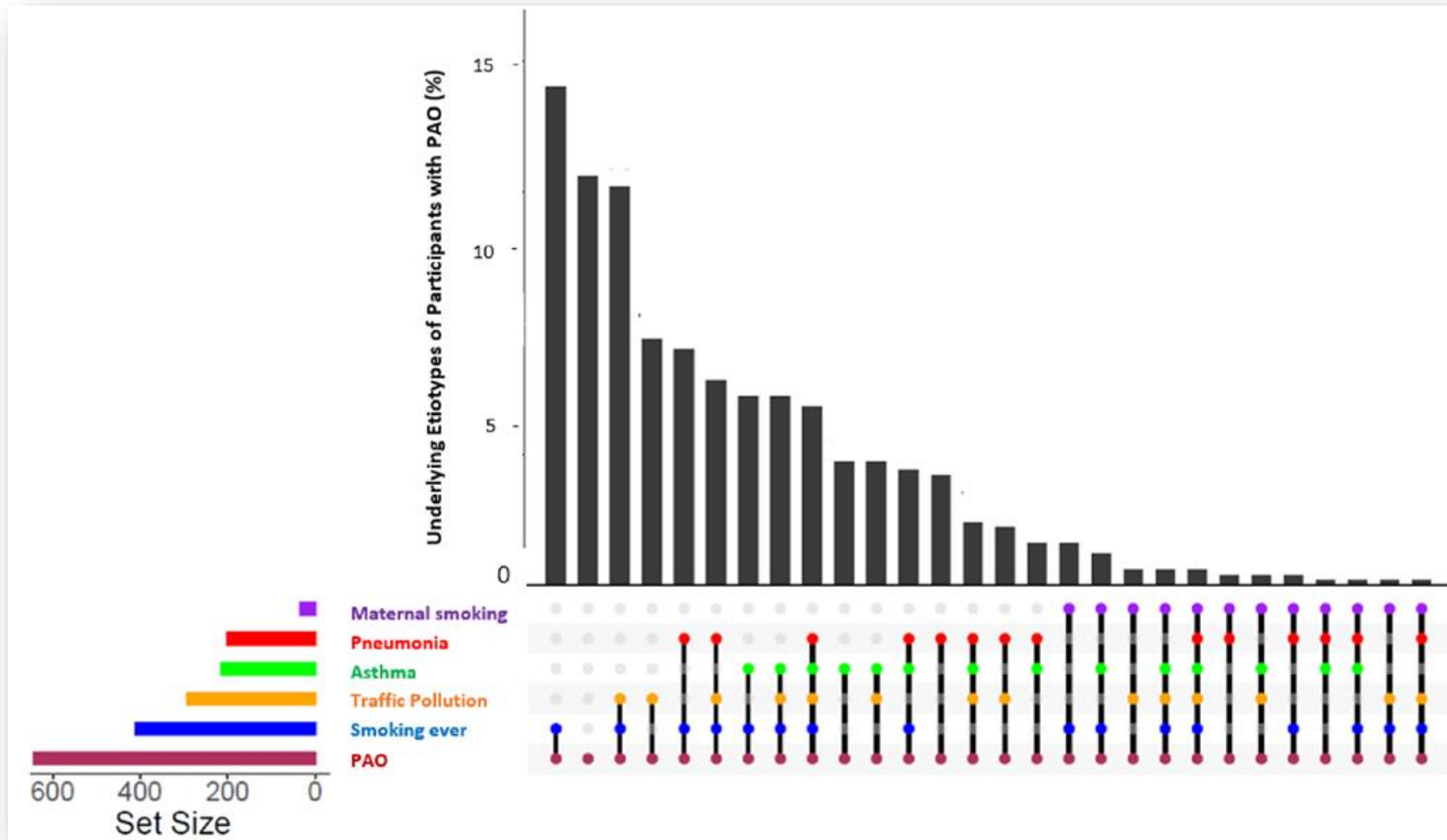
Die wichtigsten Risikofaktoren



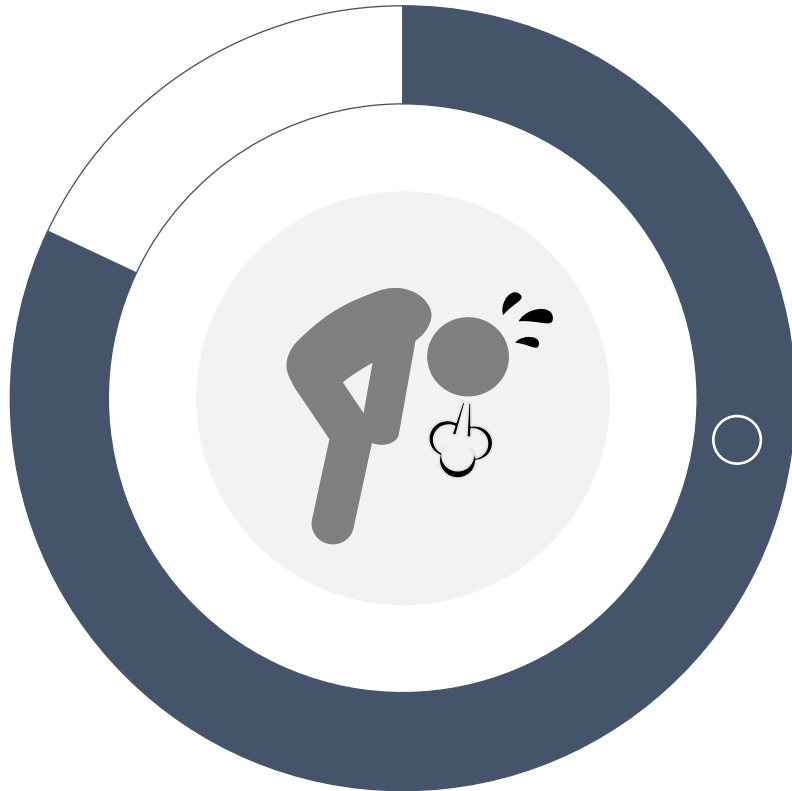
Prävalenz der COPD in Österreich



Ätiologie der COPD in Österreich



Leitsymptome der COPD



- **Dyspnoe**
- **Leistungseinschränkung**
- **Chronischer Husten ± Auswurf**

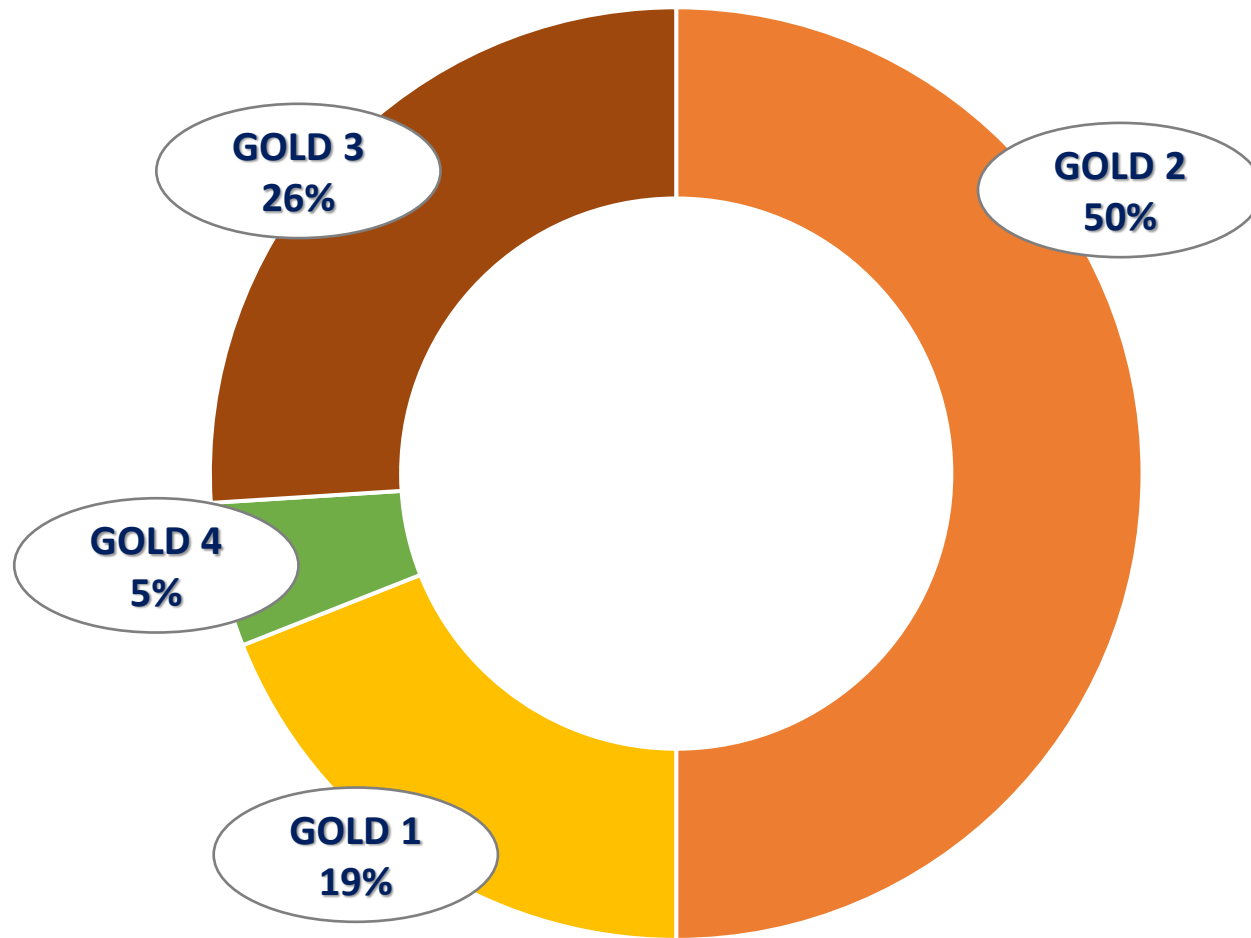
Missed opportunities for COPD diagnosis in real-world clinical practice

**Within 5 years prior
to diagnosis of COPD:**

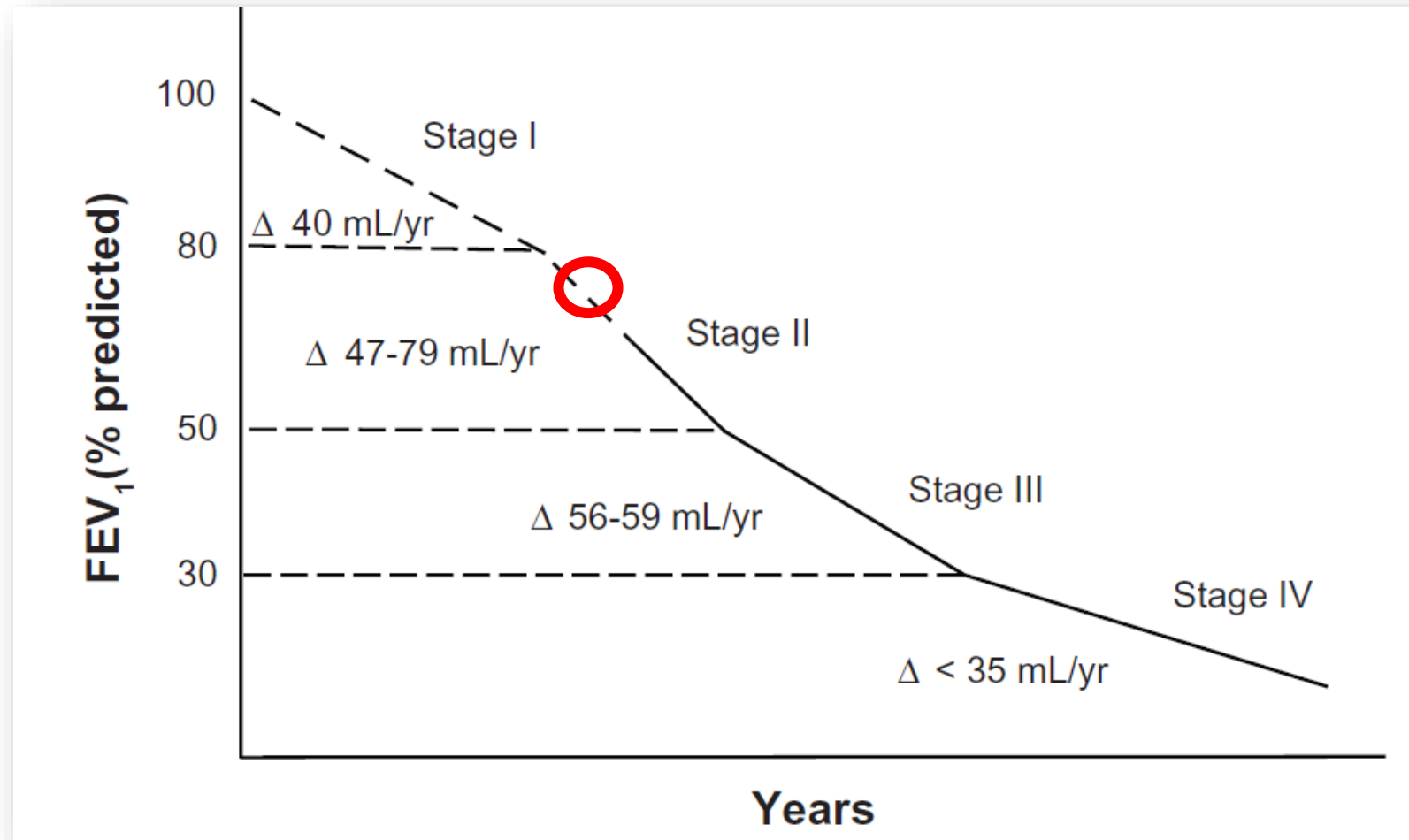
- **85% were seeing physicians
because of respiratory problems**
- **40% received systemic steroids
without diagnosis**

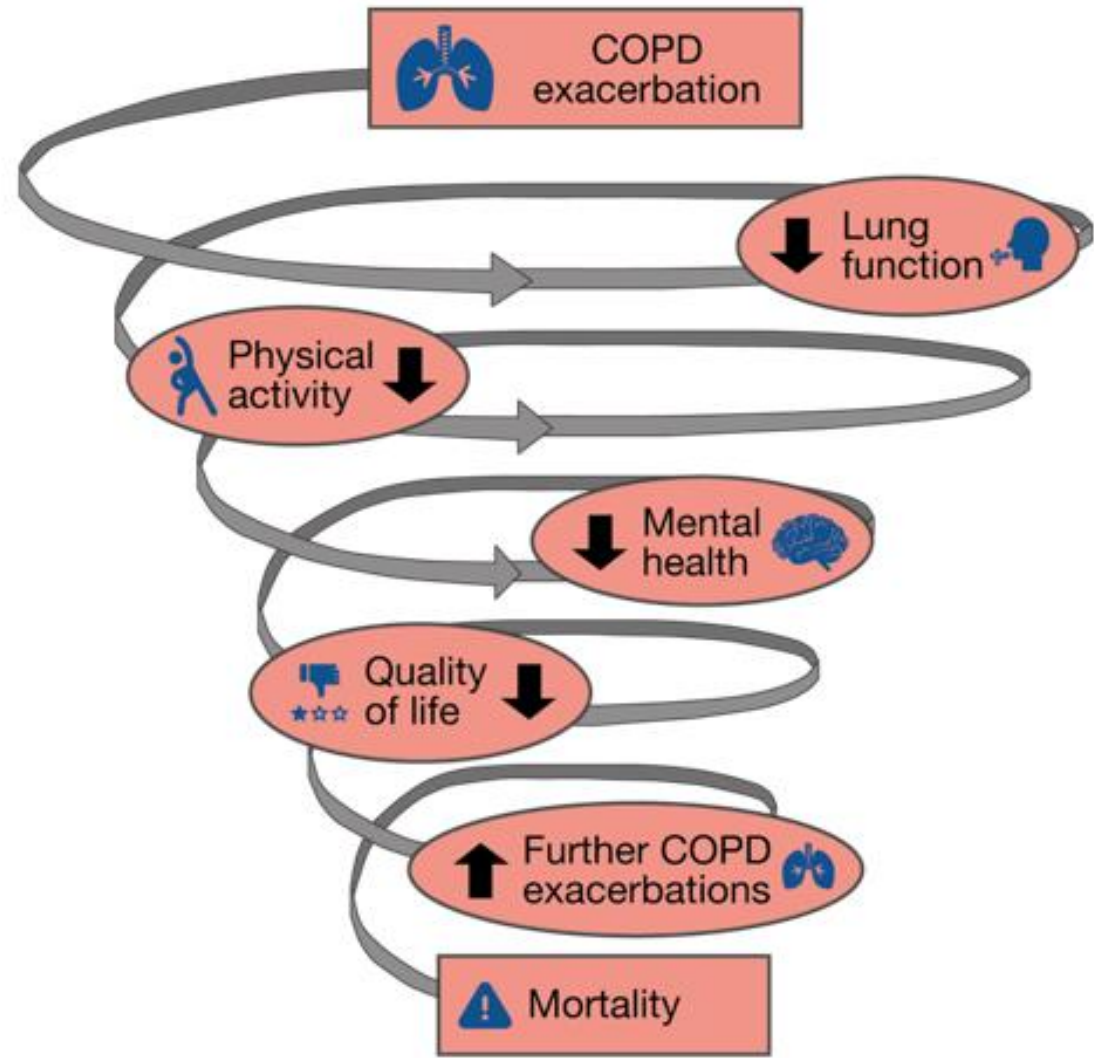


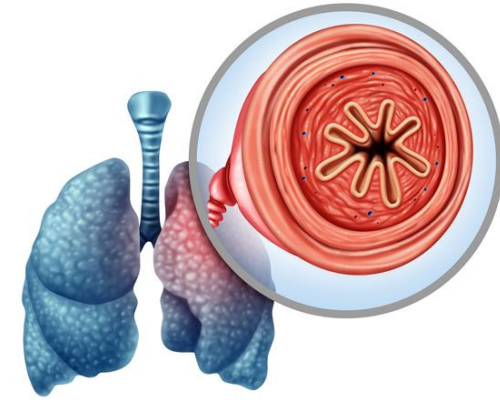
Wenige Patienten werden im Frühstadium der COPD diagnostiziert



Lungenfunktionsverlust bei COPD schneller im Frühstadium







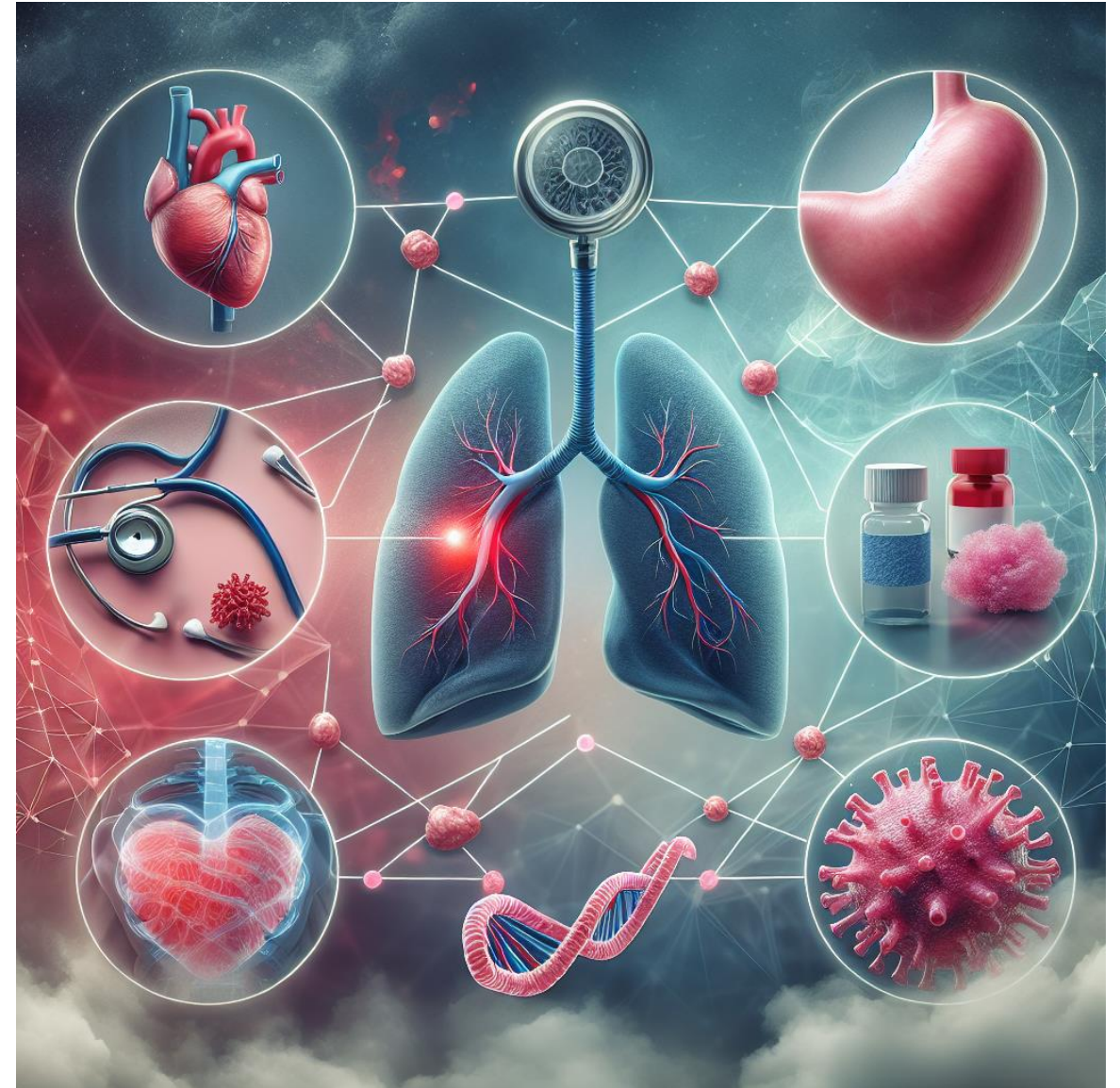
Bis zu 77% aller Patient*innen mit COPD haben innerhalb von 3 Jahren zumindest eine moderate oder schwere Exazerbation¹

1. Hurst JR et al. *N Engl J Med.* 2010;363:1128-1138;
2. Han MK et al. *Lancet Respir Med.* 2017;5:619-626
3. Tashkin DP et al. *N Engl J Med.* 2008;359:1543-1554.

COPD



Lungenkrebs
Herz-Kreislaufkrankungen
Osteoporose
Depressio
Lungenfibrose
Gastroösophagealer Reflux



COPD

↓

Verlust an (gesunden) Lebensjahren

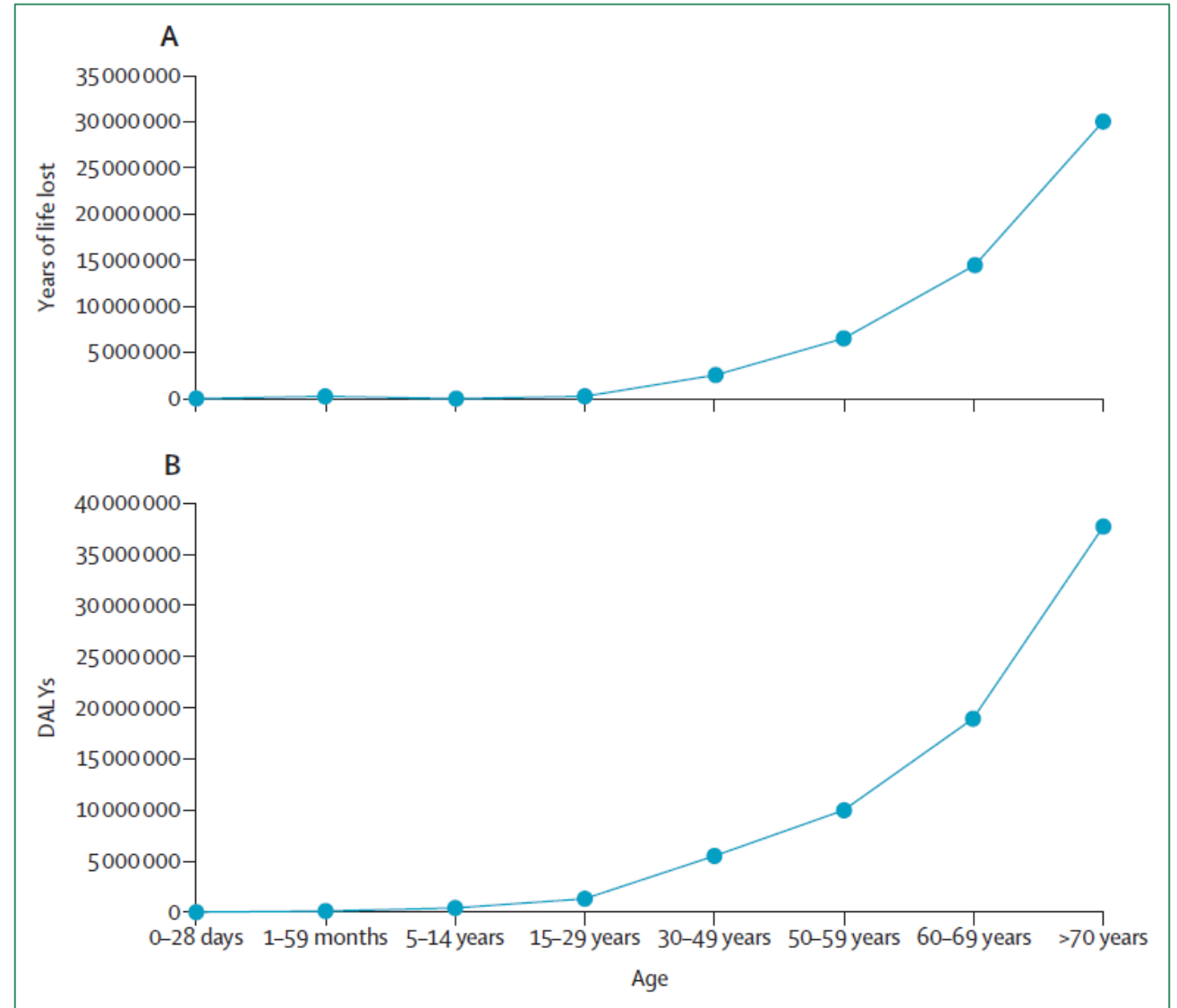
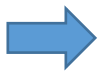
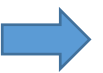
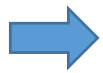


Figure 1: DALYs (A) and years of life lost (B) to COPD

In 2019, COPD was the seventh leading cause of DALYs globally and the eighth leading cause of years of life lost.⁴

- **Aufklärung (KiGAs, Schulen,...)**
Raucherentwöhnung
(Spezialambulanzen, Incentives, Vergütung,...)
- **Arbeitsmedizin**



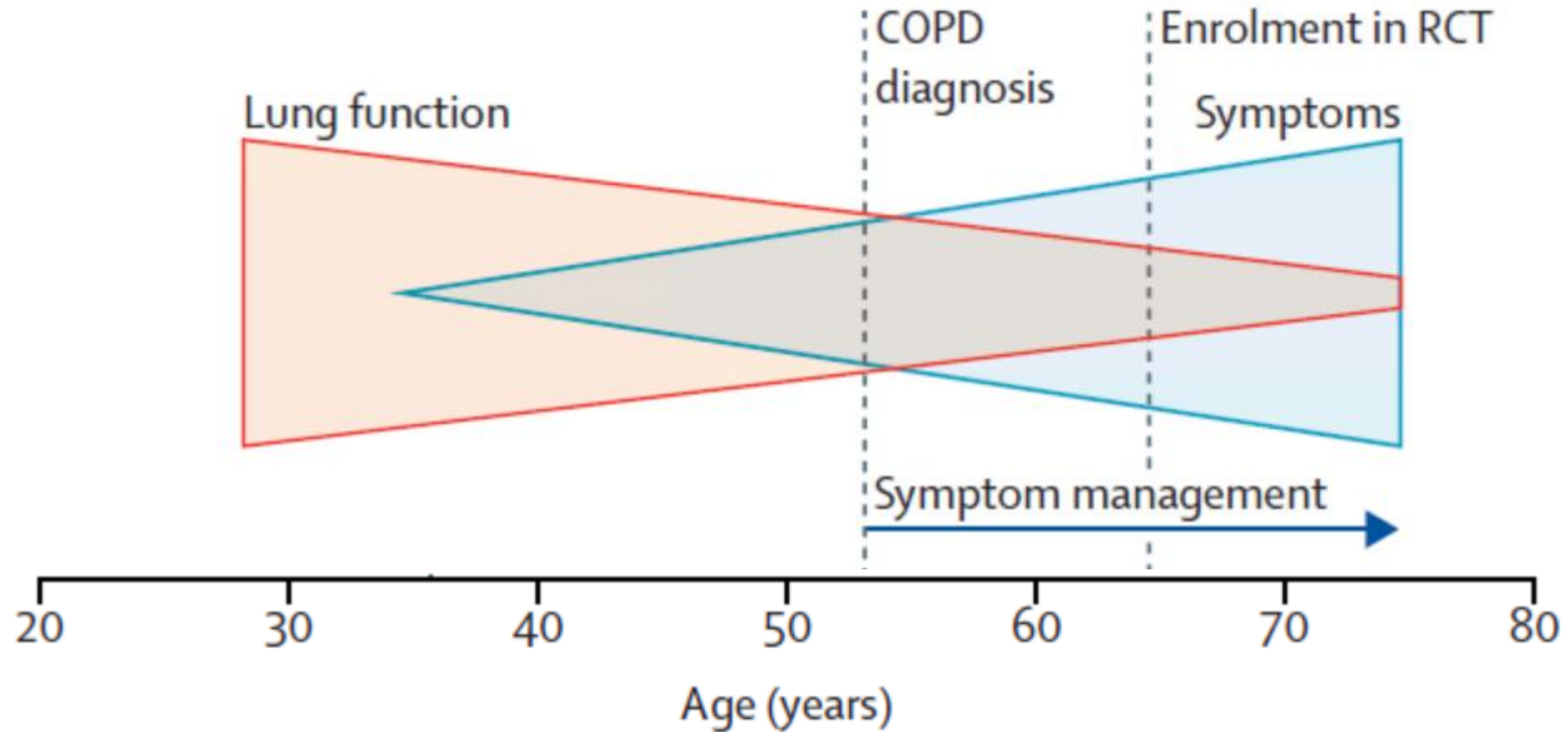
- **DMP**
- **Spezialambulanz COPD**
- **Management Komorbiditäten**
- **Palliative Care**

- **Sozialpolitik**
- **Perinatales Screening**
- **Raucherentwöhnung**
(Spezialambulanzen, Incentives, Vergütung,...)

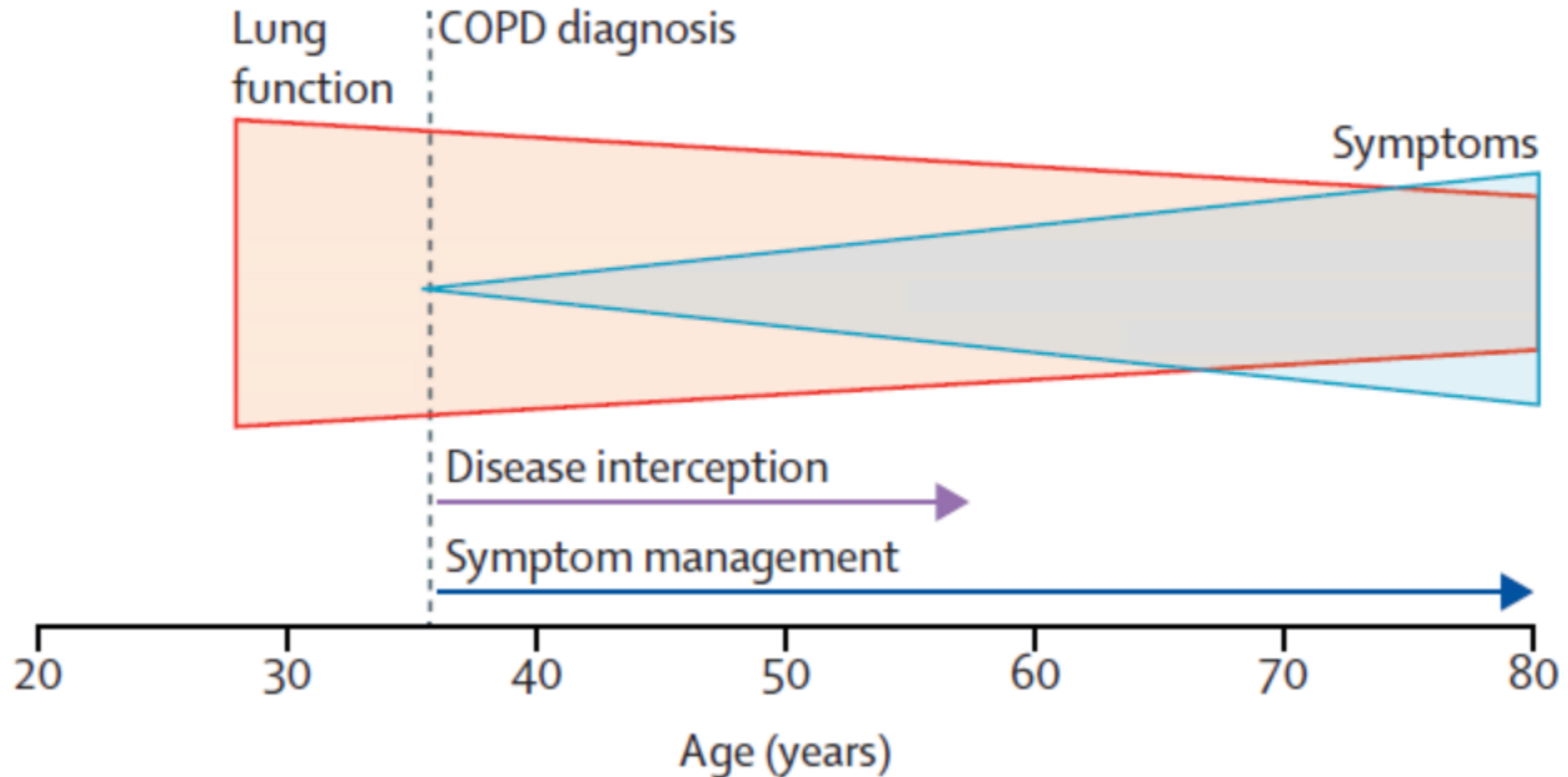
- **COPD-Früherkennung**
- **Disease Management (DMP)**
- **Lungenrehabilitation**

COPD-Diagnose: aktuelle Situation

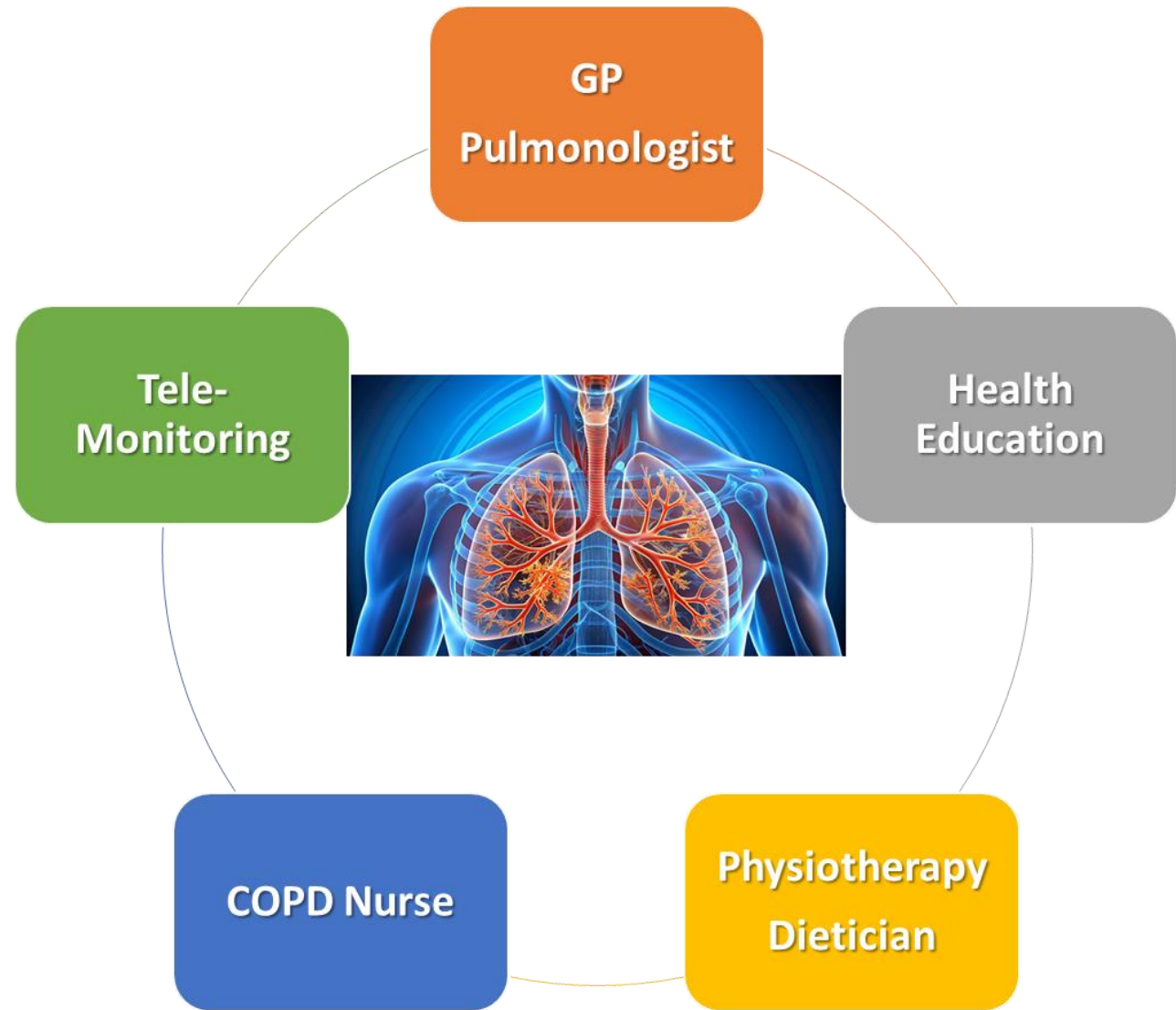
A



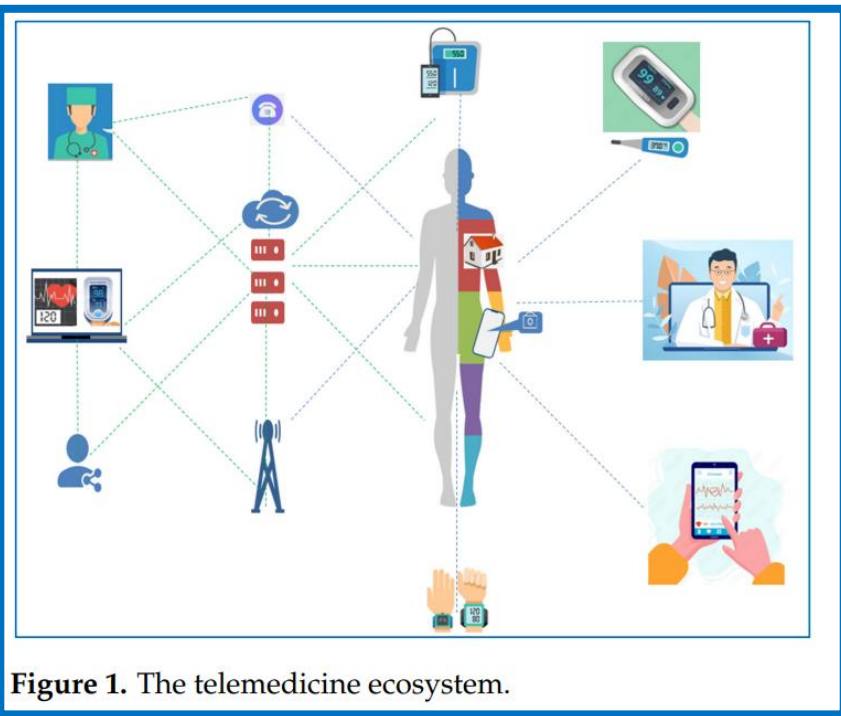
COPD-Diagnose: Früherkennung wünschenswert



Disease Management Program



Telemedizinische Betreuung als Bestandteil des COPD- (Selbst)Managements



Effectiveness of Telemonitoring for Reducing Exacerbation Occurrence in COPD Patients With Past Exacerbation History: A Systematic Review and Meta-Analysis

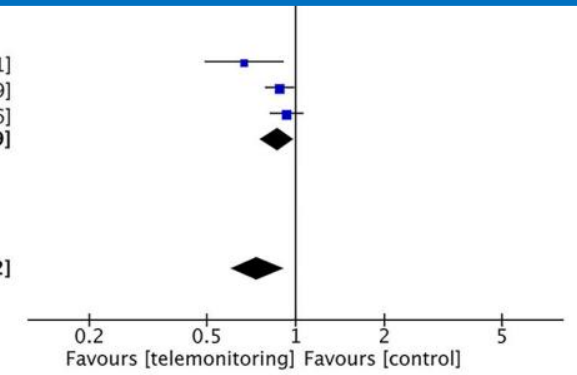
1.4.3 12 months

2006 Casas	29	65	60	90	17.1%	0.67 [0.49, 0.91]
2016 Vianello	170	230	87	104	24.9%	0.88 [0.79, 0.99]
2018 Kessler	112	157	124	162	24.3%	0.93 [0.82, 1.06]
Subtotal (95% CI)		452		356	66.3%	0.87 [0.76, 0.99]

Total events 311 271
 Heterogeneity: $\text{Tau}^2 = 0.01$; $\text{Chi}^2 = 4.00$, $\text{df} = 2$ ($P = 0.14$); $I^2 = 50\%$
 Test for overall effect: $Z = 2.13$ ($P = 0.03$)

Total (95% CI) 690 591 100.0% **0.74 [0.60, 0.92]**

Total events 373 368
 Heterogeneity: $\text{Tau}^2 = 0.04$; $\text{Chi}^2 = 22.48$, $\text{df} = 6$ ($P = 0.0010$); $I^2 = 73\%$
 Test for overall effect: $Z = 2.76$ ($P = 0.006$)
 Test for subgroup differences: $\text{Chi}^2 = 2.30$, $\text{df} = 2$ ($P = 0.32$), $I^2 = 13.2\%$



26% Reduktion von Spitalsaufenthalten

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The Lancet Regional Health - Europe
2023;35: 100757

[Hicham Achebak](#)^{a,b,*}, [Judith Garcia-Aymerich](#)^{b,c,d}, [Grégoire Rey](#)^a, [Zhaoyue Chen](#)^b, [Raúl Fernando Méndez-Turrubiates](#)^b and [Joan Ballester](#)^b

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via ChatGPT

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