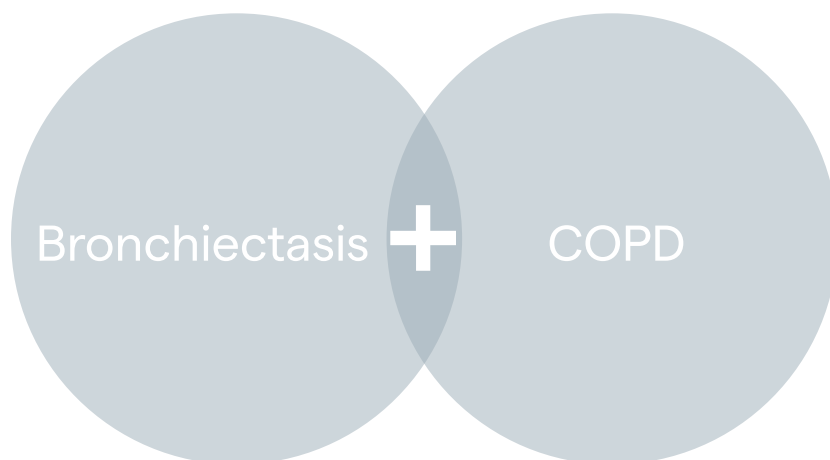




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BRONCHIECTASIS (BE) AND CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

Research on Bronchiectasis COPD Overlap
Syndrome (BCOS) is emerging.¹⁻⁴



GLOBAL INITIATIVE FOR COPD (GOLD) GUIDELINES ON BRONCHIECTASIS

- **2014:** Bronchiectasis defined as a comorbidity of COPD.²
- **2015:** Emphasized the influence of bronchiectasis in the natural history of COPD.⁵
- **2016:** Comorbid bronchiectasis associated with longer exacerbations and increased mortality. Treatment should be along conventional lines for bronchiectasis with the addition of usual COPD strategies where indicated.⁶
- **2017:** When exacerbations are repeatedly characterized by purulent sputum, patients should be investigated for bronchiectasis.⁷

BCOS PHENOTYPE	BCOS HAS WORSE OUTCOMES	COMBINING BE MANAGEMENT WITH COPD	HFCWO IMPROVES OUTCOMES IN BE
<ul style="list-style-type: none"> ▪ Clinical features/factors <ul style="list-style-type: none"> – Moderate to severe airflow obstruction^{1-4,8} – Increased daily sputum² – More frequent respiratory exacerbations^{3,9} – Higher rates of potential pathogenic microorganisms^{1,2,4,8} – At least one hospitalization⁴ 	<ul style="list-style-type: none"> ▪ Greater sputum production⁸ ▪ More frequent respiratory exacerbations⁹ ▪ Longer duration of acute exacerbation^{1,4,8} ▪ Higher rate of pathogenic microorganisms in sputum^{1,4,8} ▪ Poorer lung function⁸ ▪ Extended ICU and hospital length of stay⁸ ▪ Increased mortality^{1,2,10} 	<ul style="list-style-type: none"> ▪ Bronchiectasis common in lower lobes^{11,12} <ul style="list-style-type: none"> – May reflect gravity-dependent retention of infected secretions ▪ Retained secretions.^{11,12} <ul style="list-style-type: none"> – Cause obstruction and damage of airways – Create an environment for bacteria to grow, which may lead to recurrent infections^{11,12} ▪ Airway clearance critical to management¹¹⁻¹⁴ 	<ul style="list-style-type: none"> ▪ Decrease in: <ul style="list-style-type: none"> – Hospitalizations^{15,17} – Office, emergency department and hospital outpatient visits¹⁵ – Prescriptions/antibiotic use^{15,17} ▪ Improvement in: <ul style="list-style-type: none"> – Dyspnea and quality of life¹⁶ – Several lung function parameters compared to CPT¹⁶ ▪ Patients report good-excellent outcomes in: <ul style="list-style-type: none"> – Ability to clear lungs¹⁷ – Overall respiratory health¹⁷



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