

## COMPARATIVE STUDY OF AUSTRALIAN AND GLOBAL GRADING OF CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD) SEVERITY

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**Introduction:** Although guidelines to classify COPD severity have previously been proposed in Australia (TSANZ, 2002) and globally, (Global Initiative for Chronic Obstructive Lung Disease. GOLD, 2004), there are discrepancies between these guidelines (Dent et al ANZSRS 2003). Publication of a new Australian grading system (COPDX, 2003) again raises questions about uniformity of categorisation of COPD severity using lung function criteria alone. We are currently undertaking a study to assess the addition of nutritional status, symptom and quality of life scores in producing a more reliable grading for risk stratification and treatment strategies. Here we present a comparison of two existing guidelines. **Aim:** To compare current classification of COPD using guidelines from COPDX and GOLD. **Methods:** A prospective study of 68 adult patients with a clinical diagnosis of COPD was conducted. All patients had a smoking history of >10 pack years, no evidence of reversible airways disease ( $\Delta FEV_1 < 12\%$ ), and were assessed using spirometry. Patients were classified as per guidelines.

**Results:** Table 1 – Patient classification according to COPD guidelines (n=68)

Guideline	Normal/ At risk	Mild	Moderate	Severe	Very Severe
COPDX (FER not used)	12	15	24	17	n/a
GOLD (FER <70%)	4	10	27	21	6

**Discussion:** Table 1 shows considerable disparity between these two severity grading guidelines, the most striking of which was the presence of a sizeable group of patients (n=8) with a forced expiratory ratio (FER) of <70% classified as normal by COPDX and mild by GOLD. **Conclusions:** Important discrepancies exist between COPDX and GOLD guidelines for the grading of COPD severity. These discrepancies have important implications for the management of these patients. **Key words:** COPD, COPDX, GOLD

