The magnitude of Asthma COPD Overlap Syndrome (ACOS) among patients diagnosed as Asthma and COPD.

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Background:

Differentiating Asthma with fixed airway from COPD is hard, due to similar symptom profile. Our attempts to understand the pathogenesis of these diseases started with Dutch hypothesis, which considers both Asthma/COPD as same spectrum, unlike the British hypothesis where Asthma and COPD are considered unique with no similarity(1). However, 'ACOS' Asthma COPD overlap Syndrome is even complicated. It has both Asthma, COPD features(2). ACOS has higher morbidity, more economic burden and poorer QOL recent studies say(3).

Methods:

A prospective observational study done among diagnosed cases of Asthma and COPD in Pulmonary OPD review patients (> 6 months). Possible subjects were short listed prior to OPD. 60% patients were selected by simple randomization. Questionnaire was filled, X ray, spirometry, 6 MWT and other relevant investigations were reviewed. SPSS software was used for data analysis.
Results:

Of 877 patients included in the study (M = 445, F = 432), 714 were diagnosed as Asthma, 156 as COPD and 7 patients as ACOS. Using the GINA Tool, 48 (5.4%) were truly ACOS. Of all asthma patients, 95.5% truly had asthma, 2.8% of them had ACOS and 1.7% had COPD. Of all COPD patients, 58% were truly COPD, 17.2% was ACOS and 24.8% was asthma. ACOS patients had more recurrent exacerbations than Asthma/COPD patients. ACOS had more exacerbations, admissions and NIV use than asthma but lesser than COPD.

Conclusion:

ACOS is widely prevalent in India as well. Gina tool is a wonderful instrument to differentiate Asthma, COPD and ACOS.

References:

