Obstructive Bronchopulmonary Disease: Official treatment guidelines of the Czech Pneumological and Phthisiological Society; a novel phenotypic approach to COPD with patient-oriented care

Vladimír Koblížek1, Jan Chlumský2, Vladimir Zindr3, Jana Satinská-Kociánová4, Katerina Neumannová5, 6, Jakub Zatloukal5, 6, Barbora Novotná1, Sarka Prachárová1, Vratislav Sedlák1, Jaroslav Zak7, Jaromír Zatloukal8, Karel Hejduk9

The official guidelines of the European Respiratory Society (ERS) recommend the following steps in the management of COPD patients: 1) diagnosis of COPD using a combination of medical history, pulmonary function testing, and chest CT; 2) treatment of acute exacerbations and long-term treatment; 3) phenotype-directed therapy; 4) management of the patient's comorbidities and risk factors. The patient's symptoms, risks, needs, and wishes should be considered in the treatment plan.

COPD DIAGNOSIS

COPD Diagnosis according to the European Respiratory Society (ERS) recommendations

The foundation of the modern approach to COPD is made up of the patient's long-term course, symptoms, history of exacerbations, and clinical phenotype. The diagnosis should always be checked using a pulmonary function test. The essential requirement for COPD diagnosis is the presence of chronic airflow limitation on an expiratory airflow test, which is defined as a decreased FEV1/FVC ratio below the lower limit of normal (LLN). GOLD classification according to post-BD FEV1, CAT, and acute exacerbation frequency

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The new CCPS COPD Guideline aims to systematize the diagnosis and treatment of this multifaceted, multi-organ disease to achieve optimal response in accordance with the principles of personalized medicine.

CONCLUSION and CLINICAL IMPLICATIONS


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COPD TREATMENT

The aim of COPD therapy is to reduce symptoms, arrest the natural progression of the disease, improve quality of life, enhance physical activity, prevent complications and achieve a complete control of exacerbations. The ERS-ERS task force recommends a stepwise approach to COPD management (1st–4th step).

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