

New evidence highlights risk of comorbidities for COPD patients

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A new study has shown that people with chronic obstructive pulmonary disease (COPD) or people with reduced lung function are at a serious risk of developing cardiovascular disease.

The findings, which will be presented today (26 September 2011) at the European Respiratory Society's Annual Congress in Amsterdam, suggest that people with [COPD](#) and reduced [lung function](#) should be routinely screened for cardiovascular disease, as they appear to be at a considerably greater risk of it.

The issue of co-morbidities, when an individual is affected by more than one condition at the same time, is a growing problem for [medical professionals](#). As people are living longer, the presence of co-morbid conditions will increase. Patients are often treated by a specialist for one particular symptom but as the prevalence of co-morbidities increases it will become important for all clinicians to recognise other symptoms.

It is common for patients to have both [heart disease](#) and COPD but it is largely unrecognised by doctors because of overlapping clinical manifestations. COPD diagnosis can remain unsuspected in people with heart disease, but having both conditions can lead to a much worse outlook for the individual.

Previously there was very little [epidemiological evidence](#) linking the two conditions, but this study is the first to identify that nasal symptoms and cardiovascular disease are common in people with COPD and could link

the two conditions.

The researchers collected data on nasal symptoms and cardiovascular disease from 993 patients with COPD and 993 without COPD. In the latter group, the patients were divided into two categories; those with normal lung function and those with restricted lung function. 50.1% of people with COPD had [cardiovascular conditions](#) such as heart disease, [stroke](#) and [hypertension](#), compared to people with normal lung function (41%).

The results showed that nasal symptoms were common in people who had both COPD and heart disease compared to people with normal lung function: 53% of people with COPD and heart disease had nasal symptoms compared to 35.8% in people with normal lung function and heart disease.

In addition, 62.2% of people with both restricted lung function and heart disease had nasal symptoms, demonstrating that the symptoms could be used as a marker for identifying increased risk of heart disease and COPD in people yet to be diagnosed with either condition.

Dr Anne Lindberg, from the Sunderby Hospital in Sweden, said: "Our findings are the first to shed light on the links between both nasal symptoms and cardiovascular condition, in relation to people with COPD and restrictive lung function. This has important implications for clinicians who need to understand the potential overlaps of these conditions when they are treating people with COPD. In addition to raising awareness of these co-morbidities, it will also be important to investigate these links further and look at the effect that co-morbid conditions have on exacerbations and disease progression. "

Professor Marc Decramer, President of the European Respiratory Society, said: "Clinicians often forget that people with one chronic

condition usually have another illness at the same time. Many of the illnesses that are common alongside COPD, such as [cardiovascular disease](#), may also share similar traits and it is vital that we build on research such as this study to identify new therapeutic targets in the future.

"The European Respiratory Roadmap, which was launched last month, outlines the need for great coordination between medical specialists. As the population is aging, the presence of co-morbidities will increase. The roadmap suggests that [clinicians](#) need to improve their recognition of other conditions to improve patient care and look at how to manage COPD in conjunction with other health conditions."

Provided by European Lung Foundation

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