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TYPE 2 INFLAMMATION AND EXACERBATOR PROFILES IN COPD PATIENTS: REAL-WORLD DATA FROM A BRAZILIAN SPECIALIZED CENTER

SANTA CASA
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OBJECTIVE

To evaluate the profile of moderate to severe chronic obstructive pulmonary disease (COPD) patients in southern Brazil, with a special emphasis on their exacerbation risk.

METHODS

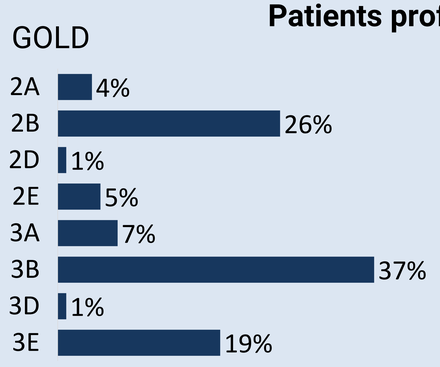
A real-world cross-sectional study was conducted using retrospective data from a cohort of COPD patients attending a specialized pulmonary outpatient clinic at a tertiary hospital in Porto Alegre, southern Brazil. For the present analysis, moderate to severe patients (according to Global Initiative for Chronic Obstructive Lung Disease [GOLD] 2025 criteria based on airflow obstruction severity, that is, forced expiratory volume in 1 second between 30% and 70% of expected) were included. Peripheral blood counts were analyzed to assess eosinophil levels, with a threshold of ≥300cells/μL used to indicate type 2 inflammation. Data collection included demographic characteristics, clinical history, spirometry results, and laboratory findings. Results are presented as mean, absolute and relative frequency.

RESULTS

Among the 255 patients initially evaluated, 243 had at least one documented blood eosinophils measurement and were included in the analysis

167 (68.7%) receiving triple therapy
inhaled long-acting beta-agonist, anti-muscarinic and corticosteroids

Patients profile



Mean age
69 Years

Men
42%

44 (26.3%)
eosinophils above or equal 300

14
(31.8%)
had at least one severe or two moderate exacerbations in the previous 12 months.

CONCLUSIONS

Despite almost 70% of the patients receiving optimized triple therapy, about one third of patients with blood eosinophil levels ≥300 cells/μL, indicating the presence of type 2 inflammation, experienced at least one severe or two moderate exacerbations in the previous 12 months. This information suggests that they could benefit from future treatments with biologic therapies.

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