

The concept of control in COPD: a new proposal for optimising therapy

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Abstract

Chronic obstructive pulmonary disease (COPD) is a very heterogeneous disease and therefore treatment should be individualised considering the different clinical characteristics and severity of each patient. In an attempt to identify individuals with similar characteristics and response to treatment, a group of experts has defined the “clinical phenotypes” of COPD as those attributes of the disease alone or in combination that “describe differences between individuals with COPD in relation to parameters that have clinical significance (symptoms, exacerbations, response to treatment, rate of progression disease, or death)”. Therefore, the clinical phenotype should be able to classify patients into subgroups with prognostic value and to determine the most appropriate therapy to achieve better results from a clinical standpoint.

However, even patients with similar clinical characteristics and degree of airflow obstruction may have a different expression of their disease or present with short-term changes in their state that may require changes in treatment. Therefore, the new concept of disease control, similar to the “control of asthma” concept should be added in the assessment of patients with COPD.

