Molecular and clinical diseasome of comorbidities in exacerbated COPD patients

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ERJ,2015, 46 (4): 1001-10

DOI: 10.1183/13993003.00763-2015 Published 1 October 2015

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limitation.

The frequent occurrence of comorbidities in patients with chronic obstructive pulmonary disease (COPD) suggests that they may share pathobiological processes and/or risk factors.

To explore these possibilities we compared the clinical diseasome and the molecular diseasome of 5447 COPD patients hospitalised because of an exacerbation of the disease. The clinical diseasome is a network representation of the relationships between diseases, in which diseases are connected if they co-occur more than expected at random; in the molecular diseasome, diseases are linked if they share associated genes or interaction between proteins. The results showed that about half of the disease pairs identified in the clinical diseasome had a biological counterpart in the molecular diseasome, particularly those related to inflammation and vascular tone regulation. Interestingly, the clinical diseasome of these

These results support the existence of shared molecular mechanisms among comorbidities in COPD.

patients appears independent of age, cumulative smoking exposure or severity of airflow