

2.02 Serum Eosinophils in Patients with Chronic Obstructive Pulmonary Disease (COPD) Attending Our Lady of Lourdes Hospital (LOL)

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Introduction: COPD eosinophilic phenotype (COPDEP) have increased risk of exacerbations despite on triple therapy (LAMA/LABA/ICS)¹. These patients may respond to anti-IL5 and are currently screened for the MATINEE trial. We perform a study to determine the prevalence of COPDEP in patients on triple therapy.

Method: Patients with a diagnosis of COPD on triple therapy attending scheduled respiratory services were screened for COPDEP defined as a peripheral-blood differential eosinophil count of 2%. COPD-asthma overlap syndrome were excluded. A retrospective chart and electronic records (NIMIS) were performed.

Results: 187 individuals with a diagnosis of COPD and on triple therapy attended scheduled respiratory services from July 2022 to December 2022. 32 individuals (17%) had increased blood eosinophil count of 2% within the past 12 months. 29 individuals (91%) had at least two moderate exacerbations and/or at least one severe exacerbation which stratify them as advanced COPD (GOLD E). The mean FEV1 and FEV1/FVC ratio were 51±19 and 62±4 percent respectively. 9 individuals (28%) were on long-term oxygen therapy. 12 patients were deemed eligible to the MATINEE clinical trial and referred.

Conclusion: The reported prevalence of COPDEP attending scheduled respiratory services is lower compared to the reported prevalence of 40%. However, there is a timely need to identify COPDEP to ensure these patients are identified as high risk and may benefit from clinical trial enrolment.

References:

¹Pavord et al. N Engl J Med 2017; 377:1613-1629 DOI: 10.1056/NEJMoa1708208

Conflict of Interest: *None to disclose*