Confirmatory Tests for COPD Are Not Routine

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SEATTLE — Patients diagnosed with chronic obstructive pulmonary disease were less likely to have a confirmatory test than were patients diagnosed with heart failure, according to results from a study conducted at a Boston-based hospital.

The finding highlights a "disconnect" between the role of spirometry for confirming pulmonary diseases and that of 2-D echocardiography in confirming heart failure, Mahendra Damarla, M.D., said at the annual meeting of the American College of Chest Physicians.

"We all know that COPD is an underdiagnosed phenomenon," said Dr. Damarla of Caritas St. Elizabeth's Medical Center, Boston. "We definitely need to improve the practice of ordering confirmatory tests in patients suspected of having COPD."

He and his associates conducted a 6-month chart review of patients with a dis-

charge diagnosis of COPD and either primary or secondary heart failure. They searched the hospital's pulmonary function test and echocardiography lab databases to determine if patients had had a spirometry or a 2-D echo performed.

They undertook the analysis because they "started to notice patients in the ICU who were diagnosed with COPD who ended up in respiratory failure on mechanical ventilation," he explained.

Of the 553 patients diagnosed with

COPD, only 169 (30%) had had pulmonary function tests performed within the past 7 years. By contrast, of the 789 patients diagnosed with heart failure, 619 (78%) had had a 2-D echo performed within the past 7 years.

Of the 219 patients with a diagnosis of both COPD and heart failure, 105 (48%) had had a 2-D echo only, 4 (2%) had had spirometry only, 74 (34%) had had both tests performed, and 36 (16%) had had neither test performed.



