



Service Priorities and Programmes
Electronic Presentations

Convention ID: 1058

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Early Detection of Chronic Obstructive Pulmonary Disease in Primary Care

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Keywords:

COPD

Primary care

case finding tool

Introduction

Chronic Obstructive Pulmonary Disease (COPD) is commonly encountered in the primary care but the condition is often underdiagnosed. Early diagnosis of COPD is difficult in primary care due to limited availability and resources for a formal spirometry test. Various studies all over the world have been done to validate the use of handheld spirometry. It is agreed that handheld spirometry can serve as a simple case finding tool to detect airflow limitation and warrant further diagnostic test to confirm the diagnosis of COPD.

Objectives

To detect airflow obstruction among smokers in GOPC setting by handheld spirometry device (COPD-6). The Diagnosis of COPD is subsequently confirmed by standard full spirometry.

Methodology

To detect airflow obstruction among smokers in GOPC setting by handheld spirometry device (COPD-6). The Diagnosis of COPD is subsequently confirmed by standard full spirometry.

Result

Totally 541 patients were recruited to perform COPD-6 during the study period, among which 139 patients (25.7%) were found to have $FEV_1/FEV_6 < 0.75$. 68 of them (48.9%) managed to attend NAHC-respiratory for confirmation study by standard spirometry. 37 out of the 68 patients (54.4%) were diagnosed to have COPD with $FEV_1/FVC < 0.7$. This study showed that COPD-6 might be a useful case finding tool in identifying COPD cases among the high risk group in primary care.