

1792 Posttest Rationale

The features of breathlessness that suggest a diagnosis of COPD in individuals aged 40 years and older include:

- A. Worsens when lying supine
- B. Tends to be intermittent and mild
- C. Tends to be exertional and progressive

Rationale: Key indicators for considering a diagnosis of COPD includes dyspnea that is progressive, characteristically worse with exercise, and persistent. Additional indicators include chronic cough, chronic sputum production, recurrent respiratory tract infections, history of exposure to risk factors, and family history of COPD and/or childhood factors.

A patient presents to your office following discharge from a hospitalization consistent with a COPD exacerbation. The patient has no previous COPD diagnosis. Spirometry reveals a postbronchodilator FEV1/FVC of 0.62 and a FEV1 58% predicted. The patient has no prior exacerbation history and states she experiences shortness of breath while walking slower than people of her age. Based on this information, which GOLD group is most appropriate for this patient?

- A. Group B
- B. Group C
- C. Group D

Rationale: The redefined ABCD assessment tool provided in the 2020 GOLD strategy report utilizes exacerbation history and symptoms to determine GOLD group. Two or more exacerbations or one or more requiring hospitalizations and symptoms consistent with mMRC scores of 2 or more or CAT scores of 10 or more indicate Group D. This patient has just had an exacerbation requiring hospitalization and experience breathlessness while walking slower than people of the same age is indicative of an mMRC score of 2.

The recent ATS pharmacotherapy recommendations makes a strong recommendation for initial LABA + LAMA combination therapy rather than monotherapy in which of the following?

- A. Patients with dyspnea or exercise intolerance
- B. Patients previously hospitalized for a COPD exacerbation
- C. Patients who continue to smoke

Rationale: The 2020 ATS pharmacotherapy recommendations make a strong recommendation to prescribe combination LABA/LAMA rather than LABA or LAMA monotherapy for patients with dyspnea or exercise intolerance. They make a conditional recommendation for the addition of an ICS to patients with dyspnea or exercise intolerance despite LABA/LAMA combination therapy and with 1 or more severe exacerbation in the past year. Smoking cessation is recommended first line for all patients with COPD.

Recently published data from 2 trials demonstrated a mortality benefit for patients with COPD on inhaled triple therapy vs dual bronchodilator therapy. The mean FEV1 at baseline for the patient populations in both trials was which of the following?

- A. <70%
- B. <60%
- C. <50%

Rationale: In the IMPACT and ETHOS study which evaluated effect of fixed-dose triple therapy on moderate to severe exacerbations in COPD and demonstrated mortality benefits for patients with COPD on inhaled triple therapy included patients with postbronchodilator FEV1 or <50%.