

# Large proportion of patients experiencing acute exacerbations of COPD are skipping out on pulmonary rehabilitation

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Acute exacerbations of COPD (AECOPD) can negatively impact a patient's health-related quality of life, lead to a decline in pulmonary function, and can also cause an increased use of health care resources. On average, patients with COPD have one to three treated exacerbations per year, and up to 25 percent of patients with COPD who are hospitalized for an exacerbation die within a year. In the past, systematic reviews have shown that pulmonary rehabilitation (PR) can reduce hospital admissions, but referral rates lacked consistency. Researchers from Imperial College London set out to determine the effect of PR on COPD exacerbation rates.

Utilizing anonymous data from the Clinical Practice Research Datalink and Hospital Episode Statistics, researchers investigated [hospital admissions](#) and general practice (GP) visits of 69,089 patients who were eligible for PR. Results found that of those COPD patients, only 6,436 were recorded as having been referred for rehabilitation, 62,019 were not referred, and 634 declined referrals when offered. Data also show that when combining GP and hospital exacerbations, people who were eligible and were referred for PR had a slightly higher exacerbation rate but not considered statistically significant.

"This study highlights a major clinical issue that shows large proportions of patients are either not starting or are not completing PR, which is a result of low referral rates," said Dr. Jennifer Quint, lead researcher.

"Results highlight that 0.98 percent of people refused a PR referral. This shows that physicians have room to improve in referring patients to PR and that patients will likely be receptive to the referrals. As an intervention, there is great potential to be effective if [patients](#) are referred and can adhere to properly designed and delivered programs."

Provided by American College of Chest Physicians

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