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Prognostic significance of chronic respiratory symptoms in individuals with normal spirometry

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In the presence of normal CXR and examination perhaps FEV₁ is a better diagnostic marker of COPD in primary care <http://bit.ly/2QAUpSA>

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To the Editor:

The study by ÇOLAK *et al.* [1] concludes that chronic respiratory symptoms are associated with respiratory hospitalisations and death in individuals with normal spirometry without known airway disease. Whilst guideline-led spirometric diagnostic criteria revolve around the ratio of forced expiratory volume in 1 s (FEV₁) to forced vital capacity (FVC), in a recent study we concluded that almost a third of patients with a diagnosis of COPD in primary care do not meet those criteria [2]. Whilst a proportion of those could be due to poor spirometry technique, FVC is a difficult manoeuvre to perform. Our study supports the finding of ÇOLAK *et al.* [1] in that airflow obstruction as defined by FEV₁/FVC may be a poor diagnostic tool. Two thirds of our patients with normal ratio had abnormal FEV₁ % predicted. In the presence of normal chest radiography and examination, perhaps FEV₁ is a better diagnostic marker of COPD in primary care.