

Pulmonary Embolism an Uncommon Cause of COPD Flare

NEW YORK (Reuters Health) Mar 02 - The prevalence of unsuspected pulmonary embolism is "very low" in patients seen in the emergency department for acute exacerbation of chronic obstructive pulmonary disease (COPD), according to a study conducted in Switzerland.

In the study, 123 consecutive COPD patients presenting to the ED with acute disease exacerbation were investigated for pulmonary embolism -- whether or not it was clinically suspected.

Diagnostic evaluation including D-dimer testing and chest computed tomography scan of the lungs identified pulmonary embolism in only 4 patients (3%), Dr. Olivier T. Rutschmann of Geneva University Hospitals and colleagues report in the journal *Thorax* for February.

The prevalence of pulmonary embolism was 6.2% in the 48 patients who had a clinical suspicion of pulmonary embolism and 1.3% in those not suspected of having pulmonary embolism.

These findings, the researchers say, indicate that pulmonary embolism is not a common finding in patients seen in the ED for an acute exacerbation of COPD.

"These results argue against a systematic examination for pulmonary embolism in this population," they conclude.

Co-authors of an editorial remind clinicians that "airway infection is the most common trigger for COPD exacerbation and strategies to reduce airway viruses and bacteria should be the most effective interventions to prevent or reduce these events."

Drs. J. A. Wedzicha and J. R. Hurst from University College London, UK, also make the point that some COPD flares "can have prolonged recovery periods, complicated by respiratory failure and co-morbidity, when the risk of pulmonary embolism may become greater."

Thorax 2007;62:103-104,121-125.