

“Influence of chronic obstructive pulmonary disease treatment in endothelial function of patients at high and very high cardiovascular risk”

Introduction

Metabolic-Vascular Unit (Division of Internal Medicine, La Paz University Hospital-IdiPaz, Madrid), is constituted of 5 physicians, a nurse and a pharmacist. We are engaged in clinical care and research of atherosclerotic cardiovascular disease (ASCVD) and its predisposing risk factors.

Challenge

Many patients at high cardiovascular (CV) risk suffer from chronic obstructive pulmonary disease (COPD). We hypothesize that the diagnosis and adequate treatment of COPD may be associated to a better tissue oxygenation, lessen systemic inflammation and, thus, improve endothelial function. We intend to assess the variations of endothelial function, after optimizing COPD therapy, in high and very high CV risk patients. To our knowledge no previous studies have explored this hypothesis. The main challenge is to perform accurate measures of endothelial function by a reproducible method that allows to detect changes after optimizing bronchodilator therapy.

Solution

Using Cardiovascular Suite-FMD Studio we can detect and quantify changes in vascular endothelium function by measuring flow mediated-dilation (FMD) of brachial artery (images).

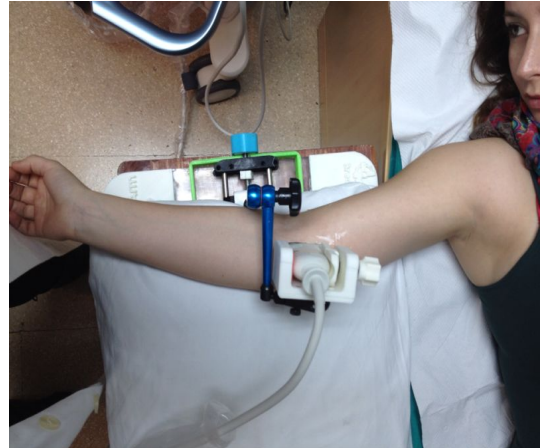
Benefit



Demonstration that an adequate therapy for COPD improves endothelial function may support the active search and treatment of this condition in patients at high cardiovascular risk. In addition to the management of traditional cardiovascular risk factors such tobacco use, lipid disorders, arterial hypertension or glucose metabolism abnormalities, conducting an active search of COPD and optimizing its treatment may be a part of the global therapy offered to these patients. Our study could be a first step in exploring the influence of COPD (impaired tissue oxygenation and persistent inflammation) in patients at high or very high CV risk.

Findings

We have initiated a prospective study with patients diagnosed as having a high and very high CV risk (according to recommendations of European Society of Hypertension and European Society of Cardiology). These patients will be recruited from the Metabolic-Vascular Unit. Patients will be tested for COPD diagnosis (pulmonary function tests). When diagnosis is confirmed, local guidelines will be followed to establish the most adequate COPD therapy. FMD studies will be done at 0 (basal, pre-treatment), 3 and 12 months after optimizing treatment. So far, we have performed basal studies of 7 patients.



Conclusion

Cardiovascular Suite-FMD Studio is an useful and reliable tool for measuring flow mediated-dilation (FMD) to detect and quantify changes in vascular endothelium function.



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