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Authors' reply

We are grateful for the comments by Falaschetti et al on the usefulness and suitability of the Global Initiative for Chronic Obstructive Lung Disease (GOLD) standard for the diagnosis of COPD. We appreciate that there are other approaches to defining abnormal airflow—indeed, one co-author (JB) was involved as a consultant to the study cited in their letter[1]—but our objective was to assess the extent of under-diagnosis according to current conventional criteria. We agree (and have acknowledged in the paper) that the lack of postbronchodilator values will lead to overestimation of the prevalence of COPD, but do not believe that this effect would be of sufficient magnitude to account for more than a small minority of the under-diagnosis apparent, especially when considering the inclusive definition of COPD diagnosis used in our study. We have reanalysed the data using the lower limit of normal (LLN) method based on reference values from Falaschetti et al[1] and find that estimates of COPD prevalence (11.2%; 95% CI 10.5% to 11.9%) and under-diagnosis (78.8%; 95% CI 76.1% to 81.5%) are very modestly reduced compared with GOLD standard figures for prevalence (13.3%, 95% CI 12.6% to 14.0%) and under-diagnosis (81.2%; 95% CI 78.9% to 83.6%). Equally, smoking prevalence figures are somewhat higher among LLN-defined cases of COPD (39.5%; 95% CI 36.3% to 42.7%) than among GOLD-defined cases (34.9%; 95% CI 32.1% to 37.8%). However, irrespective of the criterion used, under-diagnosis of COPD remains a major problem, particularly among smokers (figs 1 and 2).

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Reference

1 Falaschetti E, Laiho J, Primatesta P, et al. Prediction equations for normal and low lung function from the Health Survey for England. Eur Respir J 2004;23:456–63.
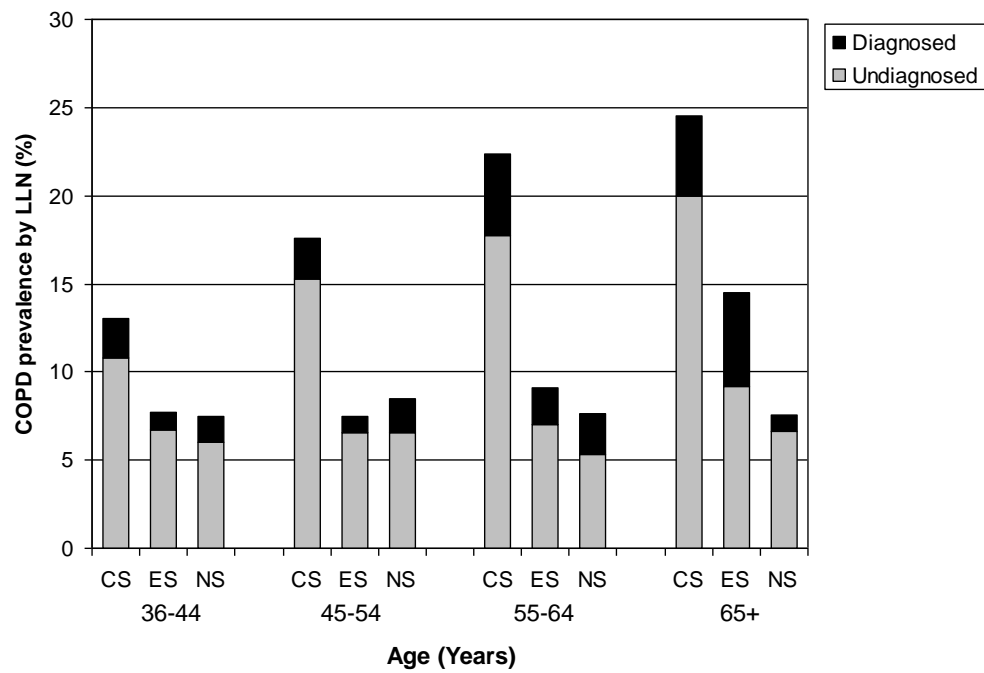
Figure 1 Prevalence and diagnosis of chronic obstructive pulmonary disease (COPD) stratified by age and smoking status using the lower limit of normal (LLN) method. CS, current smokers; ES, ex-smokers; NS, never smokers.
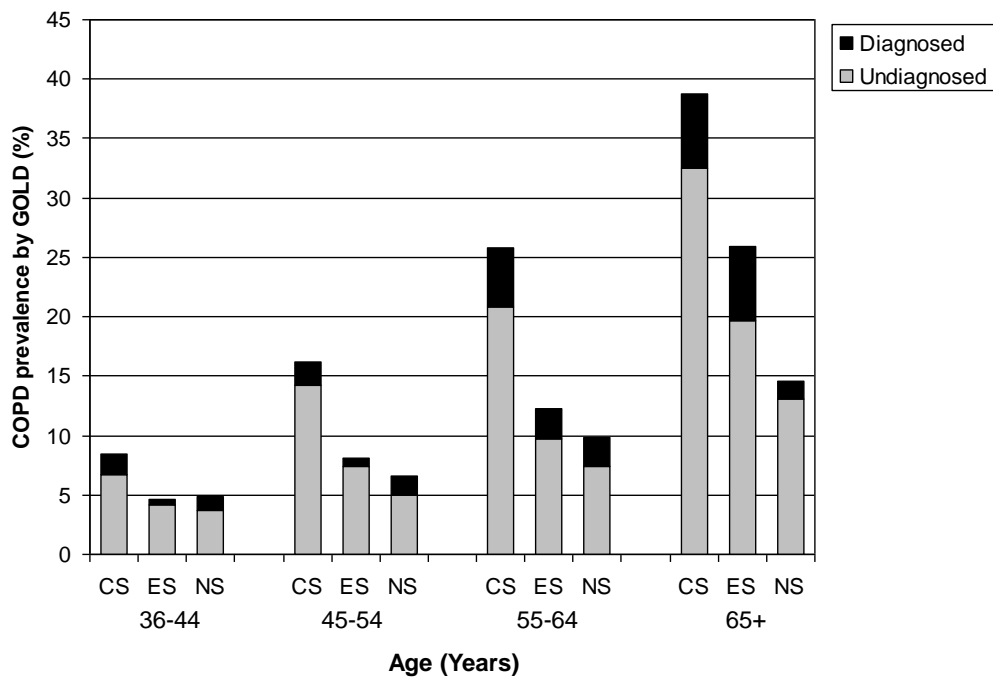
Figure 2 Prevalence and diagnosis of chronic obstructive pulmonary disease (COPD) stratified by age and smoking status using the Global Initiative for Chronic Obstructive Lung Disease (GOLD) method. CS, current smokers; ES, exsmokers; NS, never smokers.