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Clustering of comorbidities and implications for secondary care

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Comorbidities are very common in COPD. Of patients referred for pulmonary rehabilitation more than 50% report at least one chronic comorbid disorder that is of importance for the rehabilitation and its outcomes. Also, comorbidities have a huge impact on the disease burden, on the risk of hospitalization and on mortality. Recently it was reported that comorbidities come in clusters of which cardiovascular and psychological comorbidities are the most frequently seen. It appears that these comorbidities are in part related to systemic inflammation. Other mechanisms may be relevant as well. Several studies have demonstrated effects of comorbidities on outcomes of pulmonary rehabilitation. These may implicate differentiation of rehabilitation programs according to clusters of comorbidities.

Biography

Geertjan Wesseling has studied Biology and Medicine at the Free University of Amsterdam, Netherland. He has completed his Training in Respiratory Medicine in 1991 and obtained his PhD in 1993. He is a Professor of Respiratory Medicine in Maastricht and coordinates the International Master in Medicine of Maastricht University. He is a former President of the Dutch Pulmonology Society.

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