

**Conclusions.** PFT can help identifying individual features of different types of ILD being able to show even obstructive changes in a group of diseases thought to be strictly restrictive.

**Key words:** interstitial lung disease, functional status

### **159. MULTIDIMENSIONAL INDEXES AND PHENOTYPES IN THE EVALUATION OF THE RISK OF CHRONIC OBSTRUCTIVE PULMONARY DISEASE EXACERBATION**

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**Introduction.** COPD is a considerable element in worldwide chronic morbidity and mortality and invariably leads to a deterioration in the quality of life and death from it and its complications. Multiple studies had shown that exacerbations must be considered in evaluation and management of patients with COPD. Each exacerbation significantly damages quality of life and worsens the prognosis, due to association with a lung function impairment, so it also can serve as an independent prognostic factor. The task of a practitioner is to identify patients at increased risk for exacerbation, which still remains a challenge.

**Aim of the study.** Comparative assessment of prognostic value of different approaches in COPD exacerbations: GOLD ABCD classification, multidimensional indices and phenotypes.

**Materials and methods.** In the study were included 433 patients, hospitalized during the period of 2012-2016. The phenotypes and the following COPD classifications were used in order to assess spirometric data (FEV1 (forced expiratory volume in 1 second), FVC (forced vital capacity), FEV1/FVC) and e-BODE (exacerbation, body-mass index, airflow obstruction, dyspnoea and exercise): GOLD (The Global Initiative for Chronic Obstructive Lung Disease) 2001, GOLD ABCD 2011 and GOLD ABCD 2017.

**Results.** 352 (81%) men and 81 (19%) women with mean age  $62,7 \pm 9,8$  years participated in research. e-BODE index and phenotypic classification showed a high correlation with exacerbation frequency (e-BODE AUC 0.908 and phenotypic classification AUC 0.995) whereas GOLD classifications underestimated the risk (GOLD 2001 AUC (area under the curve) - 0.623, GOLD ABCD AUC - 0.546 and GOLD ABCD 2017 AUC - 0.545).

**Conclusions.** COPD diagnosis and management needs a personalized medicine strategy including assessment and prevention of future exacerbations.

**Key words:** chronic obstructive pulmonary disease, exacerbation, e-BODE, phenotype, GOLD

## **DEPARTMENT OF PSYCHIATRY, NARCOLOGY AND MEDICAL PSYCHOLOGY**

### **160. MENTAL DISORDERS IN BRAIN TUMORS**

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