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89. RURAL-URBAN DIFFERENCES IN HEALTH RELATED QUALITY OF LIFE IN COPD

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Background: While geographic variation in health care access and quality may affect health status of patients with COPD. The influence of rural or urban residence on the health status of COPD patients is studied rather superficially.

The aim of the study was to evaluate the health status of COPD patients and to identify the main predictors of quality of life in these patients according to the rural or urban residence in Republic of Moldova.

Methods: 198 consecutive COPD patients were enrolled into the study. Spirometric data were analyzed (FEV1, FVC, FEV1/FVC) and BODE index (BMI, FEV1, MRC, 6 MWD). Health-related quality of life was assessed by the St. George Respiratory Questionnaire (SGRQ).

Results: The cohort consisted of 158 COPD patients from urban area with mean age 64.6 ± 8.9 years and 40 patients from rural area with mean age 63.6 ± 8.7 years. Patients in both groups had the similar severity of bronchial obstruction: FEV1 was 42.5 ± 13.6 % versus 38.5 ± 15.4 % ($p=0.4$). There were no significant differences in SGRQ total score 64 ± 13 % vs 63.7 ± 16.5 %, $p=0.9$. Total SGRQ scores were the same but patients from rural area had worse scores in the symptom and impact domain. The forward stepwise regression analysis shows that the age and rate of COPD exacerbations are the important predictors of health related quality of life in COPD patients from urban area, which explain 32% of the total score of SGRQ ($p<0.01$). In patients from rural area, BODE index explains 52% of SGRQ total score.

Conclusion: The age and rate of COPD exacerbations were found to be the major determinants of quality of life in COPD patients from urban area, mean while BODE index in patients from rural area.

Key words: COPD, quality of life.