BRONCHIAL ASTHMA AND CHRONIC OBSTRUCTIVE PULMONARY DISEASE OVERLAP: POTENTIAL DIAGNOSTIC CRITERIA AND TREATMENT PRINCIPLES T. O. Pertseva, L. I. Konopkina, A. O. Babenko

Abstract. Bronchial asthma and chronic obstructive pulmonary disease are the two most common respiratory diseases with the various pathogenetic mechanisms and common manifestation represented by airflow limitation. Asthma is mainly associated with chronic eosinophilic inflammation of the respiratory tract and airway hyperresponsiveness with reversible bronchial obstruction, whereas chronic obstructive pulmonary disease is associated with neutrophilic inflammation of the respiratory tract and the subsequent formation of emphysema and nonreversible bronchial obstruction. However, in recent years scientific studies have shown that in a certain category of patients there are signs of combined pathology, when there are manifestations of both bronchial asthma and chronic obstructive pulmonary disease. Different clinical cases of combination of these diseases may be divided into two large groups: first — development of chronic obstructive pulmonary disease in patients with preexisting bronchial asthma, second — development of bronchial asthma in patients with preexisting chronic obstructive pulmonary disease at any point of the disease progression. In medical practice experts apply quite different diagnostic criteria, since there is no standard to date. The aim of our work was to present clinical cases demonstrating a combination of asthma with chronic obstructive pulmonary disease, as well as clinical cases with very similar clinical presentation and symptoms of bronchial asthma and chronic obstructive pulmonary disease but without overlap. In case of diagnosed chronic obstructive pulmonary disease-bronchial asthma overlap the treatment strategy should be modified by prescription of inhaled glucocorticosteroids as soon as possible, regardless of severity of airflow limitation. When bronchial asthma-chronic obstructive pulmonary disease overlap is diagnosed, it is necessary to intensify treatment with long-acting bronchodilators. We recommend to use the term "chronic obstructive pulmonary disease-bronchial asthma overlap".

Key words: chronic obstructive pulmonary disease, bronchial asthma, overlap, clinical cases.

T. O. Pertseva corresponding member of NAMS of Ukraine, Doctor of Medical Science, Professor State Institution "Dnipropetrovsk Medical Academy of Ministry of Health of Ukraine" 9, Vernadsky street, Dnipro, Ukraine, 49044; e-mail: tpertseva@dma.dp.ua

Asthma and Allergy, 2020, 1, P. 43-53.