

COMBINATION OF BRONCHIAL ASTHMA AND CHRONIC OBSTRUCTIVE PULMONARY DISEASE: TODAY'S CHALLENGES

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Abstract. Bronchial asthma (BA) and chronic obstructive pulmonary disease (COPD) are the most prevalent obstructive respiratory disorders. In recent years, increasing attention has been paid to patients with a combination of signs of both diseases, which is called asthma-COPD overlap (ACO).

The aim of the study is to summarize the current understanding of the clinical, laboratory and instrumental characteristics of ACO and the features of management of such patients.

Results. ACO is detected in 2-4 % of the general population of the United States, and among cohorts of patients diagnosed with asthma or COPD, the number of patients with combined symptoms reaches up to 15 %. Its frequency increases with age, exceeding 50 % in people over 80 years of age. ACO more commonly develops in smokers with asthma or non-smokers with long-standing asthma complicated by COPD symptoms. According to Ukrainian experts, the problem of differentiating and managing patients with overlapping signs of asthma and COPD is becoming increasingly important in the context of increasing life expectancy and smoking prevalence. Pathophysiological mechanisms of ACO include both neutrophilic and eosinophilic inflammation. The nature of the inflammatory process determines the choice of treatment strategies. The main risk factors for the development of ACO include age, smoking, bronchial hyperreactivity, airway remodeling, and chronic inflammation. Irreversible changes in the small bronchi contribute to the development of persistent obstruction, which brings the pathogenesis of asthma and COPD closer together. Despite the numerous hypotheses about the formation of ACO, there is no single view on the etiology and pathogenesis of this syndrome. To improve diagnosis, international criteria for ACO were proposed in 2016. Treatment requires an individualized approach with the use of inhaled glucocorticoids, bronchodilators, pulmonary rehabilitation, smoking cessation, and patient education. Further research, including at the national level, is needed to improve diagnostic algorithms and therapeutic strategies to improve the prognosis and quality of life of patients with ACO in Ukraine.

Key words: bronchial asthma, chronic obstructive pulmonary disease, asthma-COPD overlap.