

VALUE OF SKELETAL MUSCLE DYSFUNCTION IN PHENOTYPING OF CHRONIC OBSTRUCTIVE PULMONARY DISEASE

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Abstract

Chronic obstructive pulmonary disease (COPD) is often associated with co-morbidities. Skeletal muscle dysfunction is one of those co-morbidities. It is characterized by decreased morphological and functional characteristics of muscles. Current standards of diagnosis, treatment and rehabilitation of patients do not take it into account, affecting the quality of medical care. In this study we confirm this, presenting as an example two cases of COPD with different levels of skeletal muscle dysfunction and different manifestations of COPD.

We believe that assessment of the muscular system in routine practice will help to understand better the pathogenesis of COPD. Level of skeletal muscle dysfunction must become the component of phenotyping in COPD that can help us to identify specific phenotypes of the disease and to develop the most effective treatment and rehabilitation for the patients.

Key words: phenotyping COPD, co-morbidities, skeletal muscle dysfunction.

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