

Preface

Chronic Obstructive Pulmonary Disease (COPD) is a preventable and treatable disease with commonly associated co-morbidities and significant systemic consequences. It is the fourth leading cause of death worldwide and the only one of the top ten leading causes of death that has shown a steady increase in morbidity and mortality. A major challenge in controlling and treating COPD is understanding its complexity. While COPD can be simplistically defined as a disease characterized by airflow limitation, we now understand it as a multicomponent disease with many clinical phenotypes. Evidence is rapidly emerging that COPD has a potent inflammatory basis which likely plays a role in the systemic consequences of the disease, including peripheral muscle, cardiac, nutritional, and psycho-social dysfunction. These systemic consequences are responsible for a large portion of the morbidity from this disease. Furthermore, patients with COPD are more likely to have significant co-morbid conditions, such as cardiovascular disease, that contribute to morbidity and mortality and present challenges when designing treatment guidelines.

Chronic Obstructive Pulmonary Disease: Co-Morbidities and Systemic Consequences uses a wide angle lens to view COPD, bringing into focus the ever-important extrapulmonary aspects of this disease. The chapters included here were all prepared by internationally recognized thought leaders in the field. Our common purpose was to examine and understand the complex nature of COPD, recognize its common co-morbidities and systemic consequences, and offer suggestions for comprehensive treatment strategies.

The first section of the book provides an overview of the role of co-morbidities, the basis for systemic inflammation, and how these impact on the disablement process in COPD. The following two sections provide in-depth analysis of the most common co-morbidities and systemic consequences associated with COPD. The last section of this book addresses treatment of these medically complex patients by discussing the need for transcending disease-specific guidelines, providing novel pharmacologic treatment strategies, and giving comprehensive pulmonary rehabilitation. The book concludes with a look to the future, emphasizing the importance of

integrating care for patients with COPD. The latter will necessitate a crucial paradigm shift as we encounter much more complex and chronically ill patients in an increasingly fragmented health care system.

We thank each of the authors for their participation and applaud their efforts toward pushing the envelope in our understanding of COPD, its co-morbidities, and systemic consequences. The book is intended for both the experienced clinician and the student whose goals are to understand the complex expressions of COPD and to offer rational, individualized therapy for these highly complex patients. It is our hope that it might also be useful to the research community working on COPD, as they struggle to understand and develop better treatment strategies. We look forward to future research in this area. It has been our pleasure and it has been a distinct honor to serve as editors and oversee such wonderful scholarly work.

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