



## March 2026 WORKING GROUP MEETING AGENDA: COPD

Meeting details	
Location	Melia Palma Marina Hotel + MS Teams
Meeting date	19.03.2026
Meeting time	14:00
Chair(s)	Marc Miravittles
Attendees	Therese Lapperre Joan B Soriano Jana Bosiers Ron Dandurand Alan Kaplan Chin Kook Rhee Rory Chan Janne Estill Reshed Abohalaka Laura Lin Zijun Wang Sara Panigone (Chiesi) Ane Lopez-Gonzalez Petros Bakakos Konstantinos Kostikas Katerina Antoniou Valeria Perugini
Objectives	
1	Welcome and Introduction
2	Update on Complete Projects
3	Update on Active Projects
4	New Research Idea
5	Final Remarks



Items	
<b>Welcome and Introduction</b>	<p>Marc welcomed attendees, both in person and online, and introduced the COPD Working Group session. Participants briefly introduced themselves, reflecting a broad international representation across academia, clinical practice, and industry.</p>
<b>Update on Complete Projects</b>	<p><b>PIF in COPD study</b> Marc provided an update on the Peak Inspiratory Flow (PIF) study in COPD, a multi-centre prospective observational study conducted across 17 international sites in Europe and Asia. The study aimed to determine the prevalence of suboptimal PIF and inappropriate inhaler choice, and to assess their role in predicting exacerbations and symptom burden.</p> <p>Over 400 patients were enrolled, with strong follow-up rates over the one-year study period. Baseline results were published in 2025, and the longitudinal follow-up analysis—focusing on the predictive value of PIF and inhaler choice for exacerbations—has now been submitted. The study, funded by Boehringer Ingelheim, is considered complete.</p> <p>Marc highlighted that the dataset remains available for further analyses, and encouraged investigators to propose additional research questions that could be explored using this resource.</p> <p><b>PRECISE-X study</b> This aimed to develop a risk prediction model for first severe exacerbations using variables routinely captured in EMR and EHL data. This is an observational, retrospective cohort study, including patients with newly diagnosed COPD, and the outcome being tracked was the occurrence of the first severe exacerbation. The data for this study is sourced from the CPRD database in the UK.</p> <p>This retrospective observational cohort study was conducted using the Clinical Practice Research Datalink (CPRD), under the leadership of Bernardino Alcázar. The study has been successfully published in Thorax last year.</p> <p>The next step involves external validation of the PRECISE-X model using international databases. While this has been proposed as a follow-up project, securing funding has been challenging. Despite this, several groups expressed interest in contributing data for validation, including cohorts from South Korea, Scotland, and large international datasets.</p> <p>The discussion highlighted the importance of identifying datasets with appropriate variables and comparable patient populations (i.e. newly diagnosed COPD patients without prior severe exacerbations). It was noted that while the required sample size is not large, access to the right variables is critical.</p> <p>Suggestions for funding included exploring broader partnerships across multiple pharmaceutical companies, given the relevance of early risk prediction to treatment</p>



	<p>strategies, although previous attempts have not yet been successful. The group agreed to continue exploring funding opportunities and to build on the growing interest in data contributions.</p>
<p><b>Update on Active Projects</b></p>	<p><b>TRIPLE THERAPY study</b>          Marc provided an update on the ongoing multi-centre study evaluating the effects of triple therapy on post-discharge outcomes in patients with COPD.</p> <p>The study aims to assess one-year readmission and exacerbation risk after discharge, as well as cardiovascular outcomes, mortality, treatment patterns before and after discharge, and overall healthcare utilisation during the follow-up period. The study is designed as a retrospective observational cohort study, including patients with diagnosed COPD who have been hospitalised for an exacerbation. To support this analysis, the study relies on collaboration with international centres able to extract and share anonymised hospital-based data. To date, 22 centres across Europe, Asia, and Oceania have been engaged. Data collection is progressing well, with three datasets already completed and submitted, ten sites currently conducting data extraction, and nine sites awaiting ethics approval for data transfer. The expected final sample size is approximately 3,000 patients. Additional sites are still welcome to participate, with recruitment open until Q3, after which data validation and harmonisation will begin. Analysis is anticipated to commence in early next year. The study has secured funding from Chiesi.</p> <p>During the discussion, participants raised the potential to further enhance the dataset by including variables related to the severity of the index exacerbation, such as clinical parameters and classifications, although some variables (e.g. blood measurements) may not be consistently available across sites. It was noted that capturing such variables early is important where feasible, particularly for sites still in the data extraction phase.</p> <p>The possibility of conducting additional analyses or follow-up studies using this dataset was also discussed, including exploring inhaler-related variables and other clinically relevant factors beyond the primary study objectives.</p>
<p><b>New Research Idea</b></p>	<p>Several potential research directions were discussed:</p> <p>One idea focused on the role of fractional exhaled nitric oxide (FeNO) in COPD, particularly in light of emerging evidence suggesting its potential utility in identifying type 2 inflammation and predicting response to biologic therapies. Participants highlighted ongoing work in this area, including prospective and longitudinal data collection, as well as analyses exploring the impact of smoking status on FeNO levels in COPD patients. While FeNO is recognised as less established in COPD compared to asthma, it was considered a promising biomarker and an area of growing interest. There was agreement that a collaborative, multi-centre approach could be valuable, with a proposal to develop a short concept for further discussion within the group.</p>



	<p>A second area of interest was the use of oscillometry to assess small airway function and predict clinical outcomes in COPD. Participants noted increasing adoption of oscillometry in research settings and highlighted the potential for multi-centre studies as more centres begin to implement this technology. However, challenges related to device variability and data harmonisation were emphasised, with agreement that standardisation of equipment or methodological approaches would be essential for future collaborative studies.</p>
<b>Final Remarks</b>	<p>Marc thanked all participants for their contributions and engagement, noting the productive discussions and generation of new research ideas. Members were encouraged to continue discussions beyond the meeting and to share new ideas or outlines with Valeria, who will coordinate follow-up, keep the group updated, and support the development of these into potential projects.</p>