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LETTER TO EDITOR

An answer to Leonardo Fabbri

Dear Editor,

We are grateful to Professor Fabbri for his consideration of our paper¹ and the document recently published by the Italian Respiratory Societies.² As Professor Fabbri, we also believe that using $FEV_1/FVC < 0.7$ or $< LLN$ as entry criteria for clinical trials does not make a substantial difference, because in most instances the number of subjects with $FEV_1/FVC < 0.7$ but $> LLN$ is very small.³ The only problem using the fixed ratio is the inclusion of subjects without well documented COPD, thus potentially decreasing the power of the study. To avoid this potential bias and to make our trial comparable with others, we have included in our study only patients satisfying both criteria. We acknowledge that we did not use post-bronchodilator predicted values. Doing so, we may have excluded some COPD subjects but this cannot have affected the results of the study because all subjects included had COPD confirmed functionally. Finally, we thank Professor Fabbri for his suggestion to look at individual data to see if there are discrepancies due to different selection criteria. However, this cannot be the case in the present study because all subjects satisfied both criteria. In summary, we think the fixed FEV_1/FVC ratio can still be used for clinical trials, though it may be misleading in clinical practice as well as epidemiology.

Conflict of interest

None declared.

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