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| **New ERS/ATS guidelines for restriction and DLCO applied to Australian Scleroderma patient cohort** |
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| **Introduction:**  With the adoption of new technical standards for the interpretation of pulmonary function tests (PFTs) by the European Respiratory Society (ERS) and American Thoracic Society (ATS), the interpretation of the severity of impairment under the new standards may change. We reviewed the PFTs of a cohort of rheumatologist-diagnosed scleroderma patients in Australia comparing grading of severity of PFTs impairment under the previous technical standard of PFTs interpretation in comparison to the new technical standards.  **Methods:**  The Australian Scleroderma Interest Group (ASIG) have a cohort of patients with scleroderma. As part of routine clinical care, many of these patients have undergone PFTs. We reviewed PFTs performed on these patients with particular attention to the severity grading of restriction as measured on spirometry and diffusion factor (DLCO). The severity of impairment was then re-graded according to the new ERS/ATS technical standards and compared to the previous severity grading.  **Results:**  In total there were 506 patients in the scleroderma cohort available at the time of review.  *Severity of Restriction*  333 of these patients had undergone spirometry and 307 (92.2%) patients had spirometry data upon which we could apply the new technical standards. 285 (92.8%) of patients had no difference in grading of severity of restriction. 20 (6.5%) of patients were graded as less severe under the new technical standards, whilst only 2 (0.65%) patients were graded as more severe.  *DLCO* 326 patients had undergone DLCO testing and 253 (77.6%) of these patients had DLCO values upon which we could apply the new technical standards. Of these, 230 (90.9%) patients had no change in grading of severity of DLCO impairment under the new standards. 8 (3.16%) of patients were graded as less severe under the new standards, whilst 15 (5.93%) of patients were graded as more severe.  **Conclusion:**  Overall there was a trend towards less severe grading of restriction and more severe grading of DLCO impairment in this cohort of scleroderma patients. More research is needed to determine the clinical significance of these differences.      **Grant Support:** |