

## Disease Stability in COPD: An Important Treatment Goal



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Organization
Current Position

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## **Educational background**

2002 M.D., University of Manchester

1996 MRCP, Royal College of Physicians of London

1992 M.A., Cambridge University

## **Professional experience**

2025 Reader in Clinical Pharmacology & Respiratory Medicine
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2019 FBPhS, Fellow of the British Pharmacology Society
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Chronic obstructive pulmonary disease (COPD) is a heterogenous lung condition. Treatment targets include the improvement of symptoms and the prevention of future risks, including exacerbations and accelerated lung function decline. To achieve these targets, reducing disease activity (reversible processes that are associated with pathological outcomes) and optimising symptoms should be at the core of COPD management.

Disease stability is a low disease activity state where COPD patients are not experiencing exacerbations and their symptoms have been reduced as much as possible. Disease stability has been proposed as an attainable treatment goal. The components of disease stability are exacerbations, health status (including quality of life and symptoms) and lung function. Disease stability can be assessed over the short and long term, representing a shared treatment goal between physicians and patients.