



# A Core Outcome Set for Pulmonary Rehabilitation of patients with COPD: a modified Delphi survey

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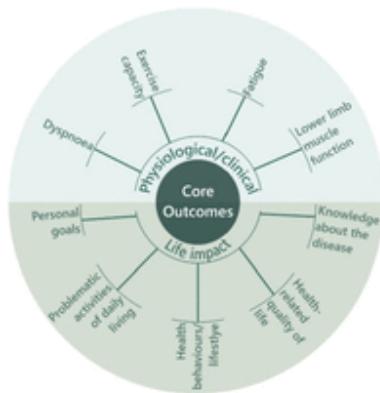
## Abstract

There is high heterogeneity of outcomes and measures reported in pulmonary rehabilitation (PR) trials of people with COPD, which hinders study comparability and benchmarking of PR. We developed a core outcome set (COS) in an attempt to overcome these challenges.

This study was informed by a systematic review and 2 qualitative studies. Outcomes ( $n=63$ ) were scored in a 2-round modified Delphi survey responded by 2 groups - G1: people with COPD and informal carers and G2: healthcare professionals, researchers, and policy makers. A 9-point Likert scale was used. Outcomes scored 7-9 (crucial) by  $\geq 70\%$  and 1-3 (not that important) by  $\leq 15\%$  of participants from both groups were included in the COS, whilst outcomes that were considered crucial only by one group were further voted in a consensus meeting.

299 people (G1:  $n=229$ ; G2:  $n=70$ ) participated in the survey (83% retention), which covered 29 countries/5 continents. After the second round, 6 outcomes were included and 3 were added in the consensus meeting. The final COS contains dyspnoea, exercise capacity, fatigue, health-related quality of life, health behaviours/lifestyle, knowledge about the disease, lower limb muscle function, personal goals, and problematic activities of daily living (**Fig.1**).

This COS can now be used by different stakeholders. Future research should establish the core measures and investigate the uptake of this COS.



**Figure 1.** Core outcomes included in the core outcome set (COS) using the domains (physiological/clinical outcomes, life impact outcomes) of the Core Outcome Measures in Effectiveness Trials (COMET) initiative's taxonomy.

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## Footnotes

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