

The state of COPD in Brazil



- ▶ **6.3 million people** living with COPD^{1*}
- ▶ **Seventh leading cause of death**^{1*}
- ▶ **Fourth leading cause of hospitalisations**^{2†}
- ▶ **Over BRL \$100 million** (USD \$27 million) cost to the public health system per year^{2†}
- ▶ **BRL \$84 billion** (USD \$25 billion) cost to the economy every year^{3‡}

*2021 data †2018 data ‡2017 data

COPD is a highly debilitating and often fatal lung disease⁴

Chronic obstructive pulmonary disease (COPD), which includes emphysema and chronic bronchitis, is the third leading cause of death worldwide (excluding COVID-19).^{1,4} It deteriorates people's lung function – restricting their airflow, making it increasingly difficult to breathe and potentially affecting every facet of a person's life.⁴ The severity of the disease increases as it progresses and people with COPD can experience flare-ups that, when severe, require emergency hospital admission.⁴ However, appropriate care can improve lung health and quality of life for people with COPD.⁴

Challenges

§2012–13 data ¶2014 data #2023 data



Protecting population health

Knowledge about COPD among the general public is poor: in one study, only 9.2% of people attending primary care clinics recognised the term COPD.^{5-7¶}



Identifying it early

Diagnosis is a significant challenge: only 12% of people living with COPD have been correctly diagnosed with a spirometry test (a globally recommended diagnostic test⁴).^{8#} Due to capacity constraints, some people have waited as long as two years for a diagnosis.^{7,8}



Facilitating access to care

Guideline-recommended care is not offered consistently: in one study, 50% of people with COPD were not receiving appropriate, guideline-recommended care, with most people being undertreated for their illness.^{9§}

'Due to poor awareness, sometimes primary care physicians underestimate the warning signs of COPD – but even the patient often underestimates their own symptoms and inability to breathe normally.'

– Dr Frederico Fernandes
Brazilian Respiratory Society

Living with COPD: Rita's story

Rita is 47 years old. She has a history of smoking, and a series of lung infections led to the removal of one of her lungs. She was then diagnosed with COPD in her remaining lung. Determined to focus on her quality of life, Rita has applied herself to learning about her disease and staying as active as possible. She dreams of being able to travel out of São Paulo, but faces logistical challenges, including difficulty communicating with her pharmacy and coordinating with her care team to ensure she can access her treatments while away. Pulmonary rehabilitation (a globally recommended intervention to promote physical activity⁴) has made the biggest difference to Rita's day-to-day life – she has found it transformative.



How is COPD being prioritised?

National policies

Overall status: **good**

Brazil's 2021–2030 strategic action plan to address chronic and non-communicable diseases includes chronic respiratory diseases and COPD.¹⁰

Clinical guidelines

Overall status: **moderate**

Brazil has a COPD patient pathway and national clinical guidelines for COPD, but implementation has been limited and awareness is poor among primary care physicians.^{6 11-13}

Data collection

Overall status: **poor**

National health data collection systems (e.g. in the Department of Information Technology of the Unified Health System) do not include data specific to COPD.¹⁴ Some epidemiological studies have explored the prevalence of COPD in Brazil.^{15 16}

Case study

Brazil's Telespirometry System^{7 17 18} is a tool that supports conducting spirometry tests locally in primary care. The result is sent to a respiratory specialist for interpretation, freeing up primary care capacity and ensuring best-practice diagnosis.

Policymakers must take action to:



develop a national respiratory strategy to better identify, understand and reduce the burden of COPD and other chronic respiratory diseases



expand the use of telespirometry to all primary care clinics, and provide nurses and other health professionals with training to support capacity for on-site diagnostics



improve clinical awareness of guideline-recommended diagnostics and care, and promote public awareness of the risk factors and signs of COPD



support community pharmacists to help people living with chronic respiratory diseases, including with prevention, screening, education, management, and treatment optimisation of COPD.

Contributors

We are grateful to the following individuals, whose valuable insights shaped the development of this country profile:

Dr Frederico Fernandes, Brazilian Respiratory Society

Rita Ferraz, a person with COPD

Dr Angela Honda, ProAR Foundation

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