

**Identificatie van patiënten met COPD die baat kunnen hebben bij palliatieve zorg door middel van van het ProPal-COPD instrument**

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**Tabel 1** Het ProPal-COPD instrument with its predictors, predictive performance, and optimal cut-off

Predictors in model	B*	AUC	True AUC	95%CI	Optimal cut-off	Se	Sp
(Intercept)	-3.901						
SQ beantwoord met “nee”	0.959						
Comorbiditeit(en) <sup>#</sup>	1.479						
<b>CCQ totaal, dagversie &gt; 3</b>	0.257						
<b>MRC dyspnoe = 5</b>	1.475	0.870	0.818	0.813 – 0.824	-1.365	0.900	0.728
<b>FEV1 &lt; 30% van voorspeld</b>	0.565						
<b>BMI &lt; 21 of gewichtsverlies</b>	1.005						
<b>Eerdere opnames AECOPD</b>	0.102						

\*: B, gewicht in het model.

<sup>#</sup>ongeneeslijke kanker; cor pulmonale; hartfalen; diabetes mellitus met neuropathie; nierfalen. (aanwezigheid van minimaal één van deze comorbiditeiten scoort positief)

**Afkortingen:** AECOPD, acute exacerbatie COPD; AUC, area under the curve; BMI, body mass index; CCQ, Clinical COPD Questionnaire; CI, confidence interval (betrouwbaarheidsinterval); FEV1, forced expiratory volume in 1 second; MRC dyspnea, Medical Research Council dyspnea questionnaire; Se, sensitiviteit; Sp, specificiteit; SQ, surprise question.

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## **Vitamine D en de longen**

Door Gerrit van Roekel

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