



Editorial

SEPAR Year 2015–16: COPD and Smoking. What Awaits? ☆



Año SEPAR 2015-16: EPOC y tabaco. ¿Qué podemos esperar?

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The Respira Foundation (Fundación Respira) was set up to raise awareness of respiratory disease. As part of this initiative, the Spanish Society of Pulmonology and Thoracic Surgery (SEPAR) organizes its SEPAR Years, a series of activities focusing on a specific disease or area considered a serious health problem in the community, and one that affects society, healthcare professionals and public health administrations alike. These activities help SEPAR and the Respira Foundation not only to increase their social impact, but also to achieve one of their main objectives as a scientific society and foundation: to prevent morbidity and mortality due to respiratory diseases by educating and enlightening the general Spanish population.

The most important guidelines on the diagnosis and therapeutic management of chronic obstructive pulmonary disease (COPD), including our own Spanish COPD guideline (GesEPOC), define COPD as a disease “essentially characterized by chronic airflow limitation that is irreversible and mainly associated with tobacco smoke”.^{1,2} Irrefutable clinical, morphological and epidemiological evidence confirms the etiological role of smoking in COPD.

COPD is a serious public health problem, due to its high impact on the morbidity and mortality of sufferers, and epidemiological studies predict a worldwide growth in the prevalence of this disease in coming years.³ In Spain, approximately 18,000 individuals die of COPD every year, and the social burden and healthcare expenditure are significant.^{3,4} According to the EPI-SCAN study,⁵ an estimated 2 185 765 (1 571 868 men and 628 102 women) of the 21.4 million Spaniards aged between 40 and 80 years have COPD (10.2%). According to this same study, about 73% of the population is still undiagnosed, meaning that approximately 1 600 000 subjects are unaware that they have COPD, and are therefore not receiving the right treatment.

Another significant problem faced by pulmonologists and other healthcare professionals involved in the care of COPD patients concerns the lack of awareness of the disease itself. The Conocepoc study,⁶ designed to quantify knowledge of COPD in Spain, reported

that only 17% of the population knew immediately what the abbreviation “COPD” stands for.

This is a serious problem: lack of knowledge may explain the disproportionate difference between the size of the problem and the low level of public awareness. It may also help explain the previously mentioned levels of underdiagnosis and the lack of healthcare resources and research funds assigned to COPD. To reiterate, almost 90% of this disease is caused by smoking. Smoking is an addictive, chronic disease, which in itself is a serious public health problem,⁷ producing elevated rates of morbidity and mortality. The general public has become well aware in recent years of the impact of smoking, thanks to government-sponsored awareness-raising campaigns and the creation of a legislative framework promoting preventive measures and smoking cessation.^{8,9}

The need for solutions to these problems has prompted the board of SEPAR to approve and designate the SEPAR Year 2015–16 as the “Smoking–COPD Year”. The Organizing Committee has proposed the following objectives:

1. To increase awareness and knowledge of COPD among the Spanish general public.
2. To work towards reducing the underdiagnosis of COPD.
3. To promote the role of pulmonologists in the control of COPD and smoking.

To meet these objectives, a full program of activities has been planned, focusing on both educational and social events, and on the scientific, teaching and research aspects of COPD. Our Communications Desk will play a key role in the strategic dissemination of clear, concise, focused messages, all of which will carry the SEPAR Year seal, thus helping to fulfil our objectives. Our Society has independent sections specializing in COPD and Smoking, and these will work with the different regions and autonomous communities of Spain to organize informative and educational events for the general public (via the Respira Classroom initiative), and members of our Society will participate in scientific and teaching sessions. A series of meetings and talks has been planned with the aim of establishing contacts and strategic links with the regional and central health authorities, and, of course, with other scientific societies. In these exchanges, SEPAR should demonstrate its past and present leadership role in the management

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of both diseases. Naturally, teaching and research activities will play a significant part, and several dedicated continuous professional development programs, research projects, round tables and symposia have been planned. Experts in both fields will play an active part in all these initiatives, the principal objective of which is to emphasize the close relationship between COPD and smoking. Finally, in order to monitor and evaluate our achievements, we plan to repeat the Conocepoc study in the final month of this SEPAR Year.

Our aims are clear, and the program of activities is designed to ensure that these aims are met. To achieve this, we will need the help of each and every member of our scientific society. With this editorial, we would like to thank all the members of our honorary, executive, operational, and advisory committees for their involvement in developing and launching SEPAR Year 2015–2016: COPD and Smoking. Our thanks also go to the various institutions (particularly pulmonology societies in the different regions and autonomous communities of Spain) and to the patients' associations which support our SEPAR Year. Special thanks are also extended to the pharmaceutical industry. We are convinced that none of this would be possible without your personal help as a member of SEPAR and as a healthcare professional dedicated to the prevention and control of these two diseases that are so prevalent and impact so heavily on our healthcare activities.

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