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(RESEARCH ARTICLE)



Comparison of the "Fixed thresholds" and the "Z-Score" for Spirometric diagnosis of Asthma

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Abstract

Introduction and objective: The use of z-score to interpret lung function has been recommended by GLI 2012 [1] and ATS/ERS 2022 [2], with evidence of false positives in the diagnosis of asthma when using fixed thresholds of FEV1/FVC. The aim of our study is to analyze the pulmonary function tests (PFTs) of patients admitted to our explorations for suspected asthma according to the z-score and the fixed thresholds, with a comparison of the two methods.

Methods: Our study is retrospective, carried out over a one-year period, from February 2022 to February 2023.

Results: We collected 292 cases. The average age of patients was 30 years, with a clear predominance of women (65%).

A similarity of results according to the fixed thresholds and z-score was found in 235 cases (182 had a normal PFT and 53 had an OVD). An OVD was found in 39 cases according to the fixed thresholds, whereas PFT was normal according to the z-score. A reduction of FVC according to the z-score, while the PFT was normal to the fixed thresholds, was noted in 18 cases. It was related to a hyperinflation

In our study, using the z-score, we found 39 cases of false-positive spirometric diagnosis of asthma and under-diagnosis of reduction of FVC in 18 cases.

Conclusion: The prevalence of asthma based on spirometry is higher when using the fixed thresholds than when using the z-score, hence the need for standardization of interpretation methods, notably by GINA 2024.

Keywords: Pulmonary Function Tests; Z-Score; Asthma; Spirometry; Airway Obstruction

1. Introduction

The use of z-score to interpret lung function has been recommended by GLI 2012 [1] and ATS/ERS 2022 [2], with evidence of false positives in the diagnosis of asthma when using fixed thresholds of FEV1/FVC (figure 1).

The aim of our study is to analyze the pulmonary function tests (PFTs) of patients admitted to our explorations for suspected asthma according to the z-score and the fixed thresholds, with a comparison of the two methods.

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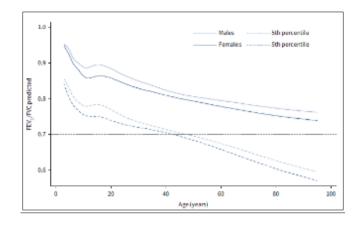


Figure 1 FEV1/FVC predicted and lower limits of normal (5th percentile) compared with the fixed cut-off of 0.7 [2]

2. Methods

Our study is retrospective, carried out over a one-year period, from February 2022 to February 2023

An analysis of PFTs of patients admitted to our explorations for suspected asthma was carried out according to the z-score and fixed thresholds, with a comparison of the two methods.

An airflow obstruction was defined as a FEV1/FVC ratio less than 75% or a z-sore less than -1.64, and a volume reduction was defined by a percent predicted less than 80% or a z-score less than -1.64.

3. Results

We collected 292 cases. The average age of patients was 30 years, with a clear predominance of women (65%).

A similarity of results according to the fixed thresholds and z-score was found in 235 cases (182 had a normal PFT (figure2) and 53 had an OVD (figure3)).

Paramètre	Unité	LLN	Ref	ULN	Pic	%Ref	ZScor	Post	%Ref	ZScqr
VEMS	8	1,92	2,55	3,17	2,16	85	-1,01	2.37	93	-0,46
CVFex	81111	2,27	2,98	3,68	2,73	92	-0,57	2,83	95	-0,35
VEMS/CVF	%	69	80	91	79		-0 16	84		0,56
DEP	Vs	4.80	6,28	7,76	14,71	75	-1,73	5,04	80	-1,38
DEM25	Va	0,48	1,62	2,75	0,84	52	-1,12	1,22	76	-0,57
DEM50	NS.	2,10	3,91	5,71	2,38	61	1.38	3,00	77	-0,82
DEM75	1/3	3,36	5,58	7,80	3,72	67	-1,37	4,82	86	-0,56
DEM 25-75	Va	1.92	3,32	4,72	2,01	61	-1,53	2.54	79	-0,80

Figure 2 Example of normal spirometry according to the fixed thresholds and z-score

Paramètre	Unite	LLN	-6 J Ref	ULN	Pac	%Ref	ZScor	Post	%Ref	ZScot
VEMS	t	2,29	2,91	3,54	2,03	70	-2.31	2,48	85	-1,13
CVFex	1	2,64	3,34	4,05	3,22	96	0.29	3.30	99	0,11
VEMS/CVF	%	73	84	95	6)	n i	-3,22	75	THE PERSON NAMED IN	-1/32
DEP	Vs	5,21	6,69	8,17	4,06	61	-2.92	4.79	72	-2,10
DEM25	l/s	0.96	2,10	3,23	0,50	24	-2,30	0.90	43	1,73
DEM50	Vs	2,52	4.33	5,14	1.45	34	-2.61	2,44	56	-1.72
DEM75	Vs	3,75	5,97	8,19	2.82	47	-2.33	445	75	-1,12
DEM 25-75	Vs	2,59	3.99	5,38	1 18	30	3.29	2,84	51	-2.78

Figure 3 Example of spirometry with OVD according to the fixed thresholds and z-score

An OVD was found in 39 cases according to the fixed thresholds, whereas PFT was normal according to the z-score (figure 4).

Paramètre	Unite	LLN	Ref	ULN	Pré	%Ref	ZScor	ZScore
VEMS	ALC: U	1,04	1,66	2,29	1,53	92	-0.33	WATER LOCK PROPERTY.
CVFex	Jee F	1,34	2,04	2,75	211	103	0,16	DESCRIPTION OF THE PERSON OF
VEMS/CVF	%	54	75	85	73		-0.31	Martin College States
DEP	1/5	3,71	5,19	6,67	3,67	71	-1.69	CONTRACTOR OF THE PARTY OF THE
DFM25	1/4	0,29	0,85	1,98	0,37	44		MATERIAL PROPERTY.
DEM50	Vs	1,27	3,08	4,89	1,39	45	-1653	CHANGE TO SERVICE
DEM75	1/5	2,50	4,72	6,94	3,34	71	-1,02	MORE NO THE PARTY.
DEM 25-75	Vs	0,89	2,29	3,58	1,09	48	-1,41	There is herein

Figure 4 Example of spirometry with OVD according to the fixed thresholds whereas PFT was normal according to the z-score

A reduction of FVC according to the z-score, while the PFT was normal to the fixed thresholds, was noted in 18 cases. It was related to a hyperinflation (figure 5).

Paramètre	Unité	LLN	Ref	ULN	Pré	%Ref	ZScor	ZScore
VEMS	7	3,92	4,76	5,59	2,14	45	-5,12	1
CVFex	1	4,69	5,70	6,70	4.53	80	-1,91	
VEMS/CVF	%	71	83	94	47	111111	-4,91	THE RESERVE
DEP	1/5	8,46	10,45	12,44	3,65	35	-5,60	100 1 100
DEM25	1/5	1,56	2,84	4 12	0,38	14	-3,14	
DEM50	1/2	3,72	5,89	8.06	1,04	18	-3.67	- FEE
DEM75	1/5	6,12	8,93	11.74	2,29	26	-3,87	-
DEM 25-75	1/5	3,48	519	6,90	0,89	17	4,12	
tex	3	多推進	军章章章	2233	13,2	1255		The same of the sa
Paramètre .	Unité	LEN	Ref	ULN	Pre	%Ref	ZScor	ZScore
CV	通道	5,05	5,97	6.89	4,53	75	-2,56	100
a	20.27	F/F/第3	4.28	亚亚亚亚	1,90	44	t training	
vc	221		重要多数	####	0,75		E TOTAL	STREET, SQUARE, SQUARE
VRE	菲斯里	排煙出	1,72	5333	2,57	149	-	STREET, STREET
VGT	Brillian and	1.87	3,50	5,12	6,98	200	3,51	Bert Land
CPT		6,53	778	8,93	8,85	114	1,53	1
VR.	4 8 1	and .	178	2,45	4,49	252	5,59	-
VR/CPT	N. 1 1	15	24	33	51	210	4,86	-

Figure 5 Example of PFT with reduction of FVC related to hyperinflation according to the z-score, while the PFT was normal to the fixed thresholds

4. Discussion

The simplicity of the fixed thresholds and percent predicted has resulted in their use across the age spectrum, leading to systematic misinterpretation of results [5, 6].

They don't take into account the observed age-related changes in measurement variability [2]

For example, the LLN for FEV1 varies from 81% predicted at the age of 10 years to 68% predicted at the age of 85 years [2] (table 1).

Table 1 The 5th percentile values (lower limit of normal (LLN)) for various lung function indices expressed as percent predicted for six individuals [2]

	Male (age 10 years; height 137 cm)	Female (age 15 years; height 162 cm)	Male (age 25 years; height 175 cm)	Female (age 25 years; height 165 cm)	Male (age 80 years; height 175 cm)	Female (age 80 years; height 165 cm)
FEV ₁	81.3	80.5	80.5	80.2	69.4	70.0
FVC	81.2	80.4	80.9	79.9	72.0	70.0
FEV ₁ /FVC	87.4	87.8	86.9	87.2	80.0	80.5
TLC	78.0	79.8	80.0	80.4	77.8	77.6
FRC	70.9	69.9	69.6	72.5	69.8	70.7
RV	40.6	40.9	49.1	52.5	55.7	57.7
D _{LCO}	75.4	77.5	79.0	77.8	72.4	74.5

In our study, using the z-score, we found 39 cases of false-positive spirometric diagnosis of asthma and under-diagnosis of reduction of FVC in 18 cases (table 2).

Table 2 Discordance in Diagnosis of Obstruction Using Different Methods

	Number of cases	Percentage
Total	292	100%
Concordance between z-score and fixed thresholds: Normal spirometry OVD	235 182 53	81% 62% 19%
Disconcordance between z-score and fixed thresholds: Normal spirometry (z-score) Vs OVD (fixed thresholds)	57 39	19% 13%
Hyperinflation (z-score) Vs normal spirometry (fixed thresholds)	18	6%

Abbreviations

- ATS American Thoracic Society;
- ERS European Respiratory Society;
- PFT pulmonary function test;
- GLI Global Lung Function Initiative;
- FVC Forced vital capacity;
- FEV1 Forced expiratory volume in one second;
- OVD obstructive ventilatory defect.

5. Conclusion

The prevalence of asthma based on spirometry is higher when using the fixed thresholds than when using the z-score, hence the need for standardization of interpretation methods, notably by GINA 2024.

Compliance with ethical standards

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Disclosure of conflict of interest

No conflict of interest to disclosed.

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