



# NON-CYSTIC FIBROSIS BRONCHIECTASIS (NCFB) IN CROATIA: DATA FROM THE EUROPEAN MULTICENTER BRONCHIECTASIS AUDIT AND RESEARCH COLLABORATION (EMBARC) REGISTRY

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## **Objective:**

The EMBARC registry was established to promote clinical research and education in bronchiectasis. The Bronchiectasis Severity Index (BSI), which uses FEV1, clinical, radiological, and microbiological features, is a strong predictor of morbidity and mortality. The aim was to contribute to the EMBARC dataset and describe and evaluate NCFB patients from Croatia for the first time.

## **Methods:**

We collected data from all Croatian patients included in the EMBARC registry. The etiology was established by analyzing their medical history and testing for specific causes. This was used to describe clinical features and calculate the BSI.



### **Result:**

137 patients (58% female; mean age 61,1 years) were included in the study. The etiology of NCFB was postinfectious (27%), asthma (17,5%), and COPD (13,9%), while 5,8% remained idiopathic. Most patients (63,5%) had normal FEV1 or mild obstruction ( $FEV1 > 50\%$ ). According to the BSI, 32,8% of patients had severe bronchiectasis, 27% moderate, and 40,2% mild bronchiectasis. Most patients (62,8%) didn't require hospital admission before study inclusion, 27,7% had 1, and 9,5% had 2 or more hospital admissions. 35% of patients didn't have exacerbations in the year of study inclusion, while 19%, 25.5%, and 20.5% had 1, 2 and 3 or more exacerbations, respectively. 42 patients had *P. aeruginosa* isolated at some point, while 30/42 had current *P. aeruginosa* isolation.

### **Conclusion:**

In our setting, NCFB were predominantly caused by previous pulmonary infections and obstructive lung diseases. This cross-section of our center's patients is in accordance with previously published studies.