

Supplementary Data

Association between Low Peak Inspiratory Flow Rate And Acute Exacerbation of Chronic Obstructive Pulmonary Disease in Recently Hospitalized Patients

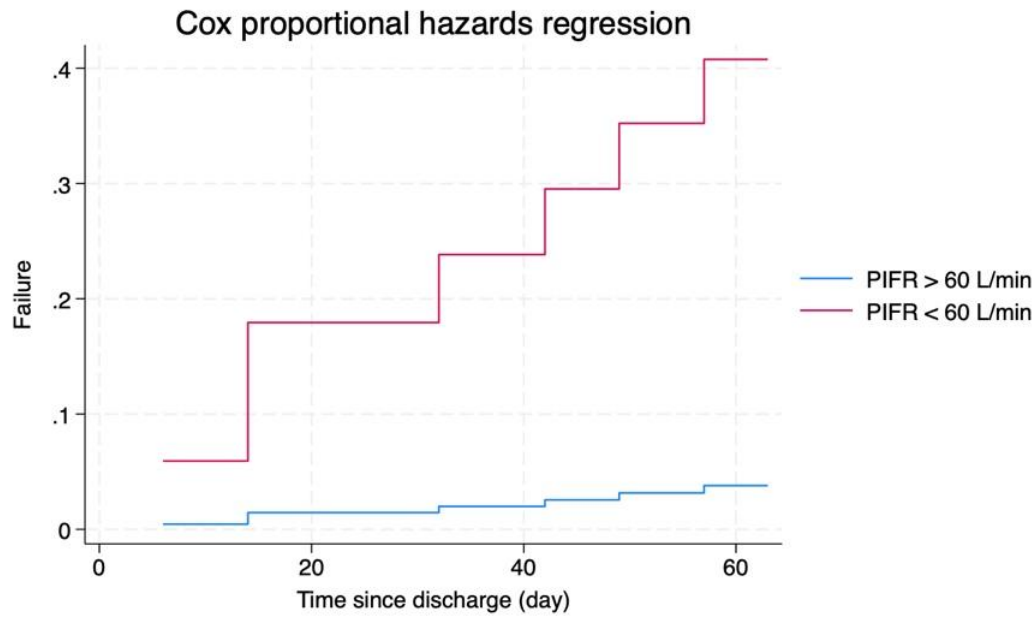


Figure S1. Adjusted cumulative hazard curves for time to first moderate-to-severe COPD exacerbation after hospital discharge

Curves were derived from a Cox proportional hazards model adjusted for age, baseline COPD Assessment Test (CAT) score, baseline FEV₁, and inappropriate inhaler device use. Patients with suboptimal peak inspiratory flow rate (PIFR <60 L/min) had a higher cumulative hazard of exacerbation than those with adequate PIFR.

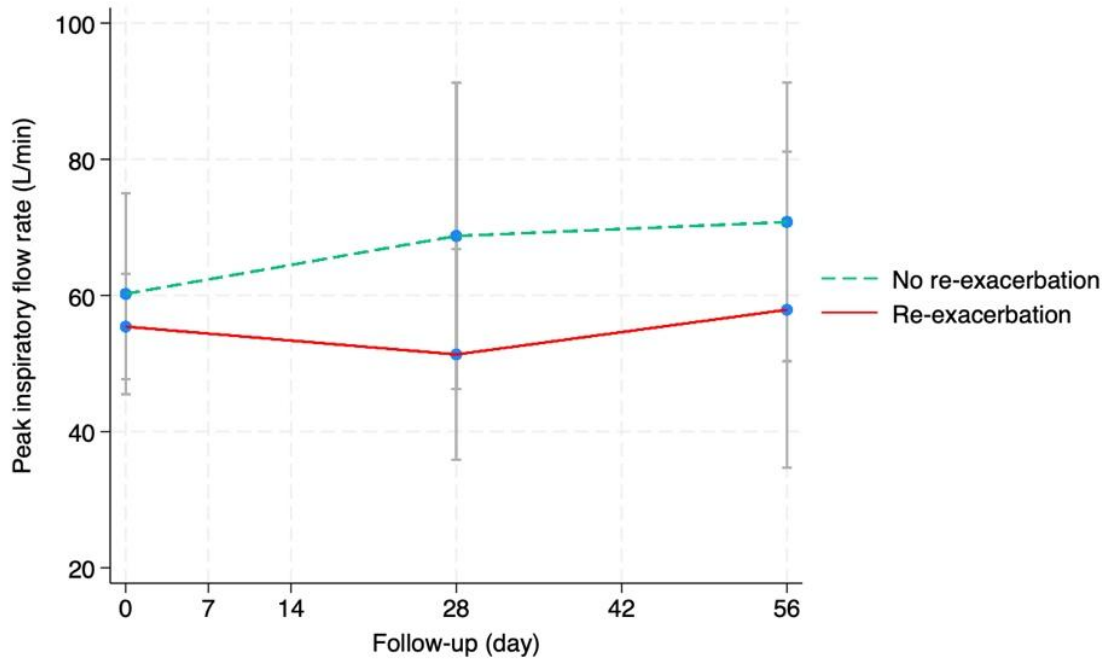


Figure S2. Mean peak inspiratory flow rate over time in patients with and without COPD re-exacerbation

Mean peak inspiratory flow rate (PIFR) was assessed at hospital discharge (day 0), day 28, and day 56 after discharge. Patients without re-exacerbation demonstrated gradual improvement in PIFR, whereas those who experienced re-exacerbation showed persistently lower, less stable inspiratory flow over time. Data are presented as mean \pm standard deviation.