

★ COPD Patients See Improvement from Stem Cell Therapy

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- *Lung Institute* : lunginstitute.com
- *Synopsis* : Updated COPD patient outcomes data suggests 84.5 percent of patients see an improvement in quality of life.

Main Document

The Lung Institute released a new study showing positive results for the majority of patients with [chronic obstructive pulmonary disease](#) (COPD) who were treated with cell therapy, or therapy in which cellular material is injected into a patient. The Lung Institute utilizes stem cells and other cellular materials to treat patients with some chronic lung conditions. Jack Coleman, Jr., M.D., senior medical director of the Lung Institute, authored the study as a follow up to his original publication, *Autologous Stem Cell Therapy and its Effects on COPD*.

The most recent data includes 349 patients who were tested for quality of life improvement, and 53 patients who were tested for pulmonary function improvement. All patients were tested prior to treatment, and then three and six months post treatment.

Our physicians hope the results will help advance widespread acceptance of clinical application of cell therapy. "Many physicians don't want to wait for perfection of a technology that may help a patient right now, in its early state, even though it may be better later. Our data shows that cell therapy is helping improve lives of those with chronic pulmonary conditions."

The results indicate that, while not everyone will see improvement from cell therapy, most COPD patients will see improvement in their quality of life, 84.5 percent, to be exact. Quality of life is measured using the Clinical COPD Questionnaire (CCQ), which is recognized and accepted as a reliable quality of life measure by the Global Initiative for Chronic Obstructive Lung Disease (GOLD) as of 2013. Further, of those tested for pulmonary function, 49.1 percent saw an improvement of 10 percent or more, with the average improvement at 12 percent.

COPD is the most prevalent form of lung disease. "Just over 149,000 people die each year in the United States from chronic lung disease related problems," said Dr. Coleman. According to the outcomes summary, COPD is expected to become the fourth leading cause of death worldwide by 2030. In fact, National Institutes of Health is currently developing a COPD National Action Plan, and is accepting public comment until Oct. 28.

"People have a desire and urgency to live," said Dr. Coleman. "If there is something that I can do for a person to extend his or her life or, ideally, get them to a point that a cure is available, I will have performed consistently with my calling."

Until recently, treatment options for people with COPD have been limited. This is due to two reasons, according to the outcomes summary by our physicians. One is a lack of understanding of the physical progression of the disease itself on a molecular level, and two is a lack of a pharmaceutical development that addresses the disease on a primary pathophysiologic level. In other words, we have been treating the results of the pathophysiologic alterations caused by the disease process and not addressing the root causes of those pathophysiologic changes.

Treatment options today include supplemental oxygen, bronchodilators and corticosteroids, all of which address the symptoms rather than the disease itself. For those with more advanced cases of COPD, a lung transplant might be an option. However, there is currently a severe shortage of donor lungs, leaving many people to die on waiting lists prior to transplantation. For those who do undergo a transplant, the outcome is often bleak. Quality of life is generally decreased, and a transplant frequently comes hand in hand with a litany of health problems due to the need for lifelong immunosuppression. Immunosuppression is the suppression of a person's immune response to a transplant organ, which is more commonly known as a rejection reaction. In other words, a person will likely be forced to take lifelong medications to prevent rejection of the organ. As a result, a lung transplant comes with a five year mortality rate of approximately 50 percent.

The FDA recently held hearings to discuss regulation of tissue-based therapies, and stem cell-related therapies were a major topic at the hearing. Most of those present at the hearing were in favor of clinical application of stem cell and other cell therapies, with patient after patient telling their unique stories of how stem cells helped long standing, and often debilitating conditions, or even saved their lives. There were a few present who objected to clinical application of stem cell therapy today in favor of continuing research first. This would place control of who may and may not use cell therapies, and for what reason they may be used for patient care, into the hands of research scientists. It would also place clinical application on hold for several years. Many patients don't have that much time.

"I ask of them," said Dr. Coleman, "to please not impede the abilities of those trying to take care of patients with what tools they have immediately at hand. I understand the desire to provide the best treatment possible, but it is the nature of the field of medicine that there are always better things on the horizon. We need to be able to treat our patients today, because too many of them will never live to see what is on the horizon. That is the simple, harsh reality of what we and our patients have to deal with day-to-day, and no amount of intellectual idealism will change that."

The Lung Institute is the leading medical provider of regenerative cellular therapy for lung diseases such as chronic obstructive pulmonary disease (COPD), pulmonary fibrosis and interstitial lung disease in the United States. To date the organization has treated over 2,500 patients. The Lung Institute's in-house outcomes summary shows that 84.5 percent of COPD patients studied saw an improvement in their quality of life. Founded in 2013 in Tampa, Fla., the Lung Institute currently operates clinics in Tampa, Fla., Nashville, Tenn., Scottsdale, Ariz., and Pittsburgh, Pa. and Dallas, Texas. For more information, please visit www.lunginstitute.com or call (800) 382-8095.

To read a full copy of the new study by Dr. Coleman, visit <https://lunginstitute.com/white->

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